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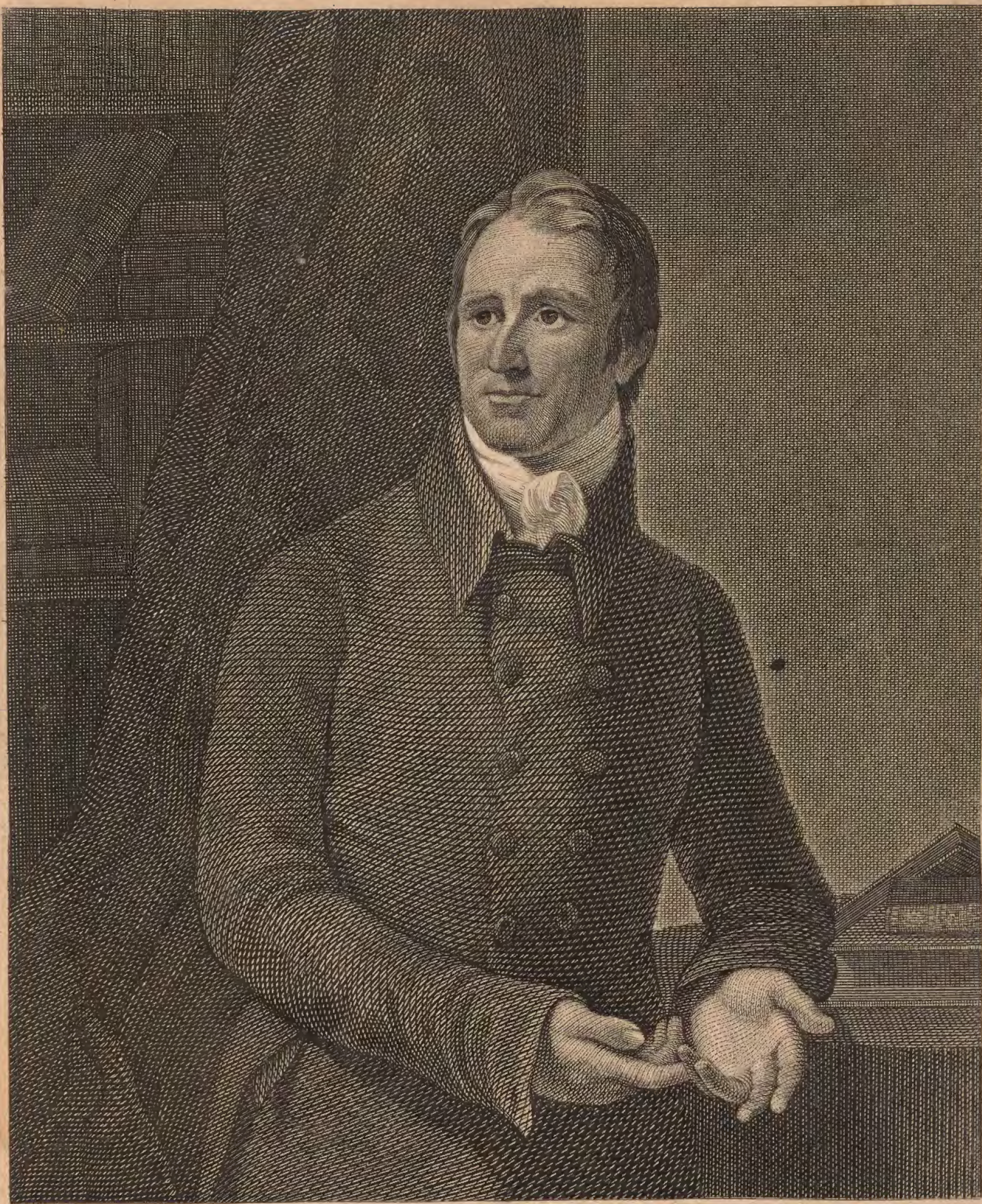
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Joseph Moore M.D.
J.B. Moore 1852 Bridgeton N.J.
(1850-52)

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Bridgeton N.J.

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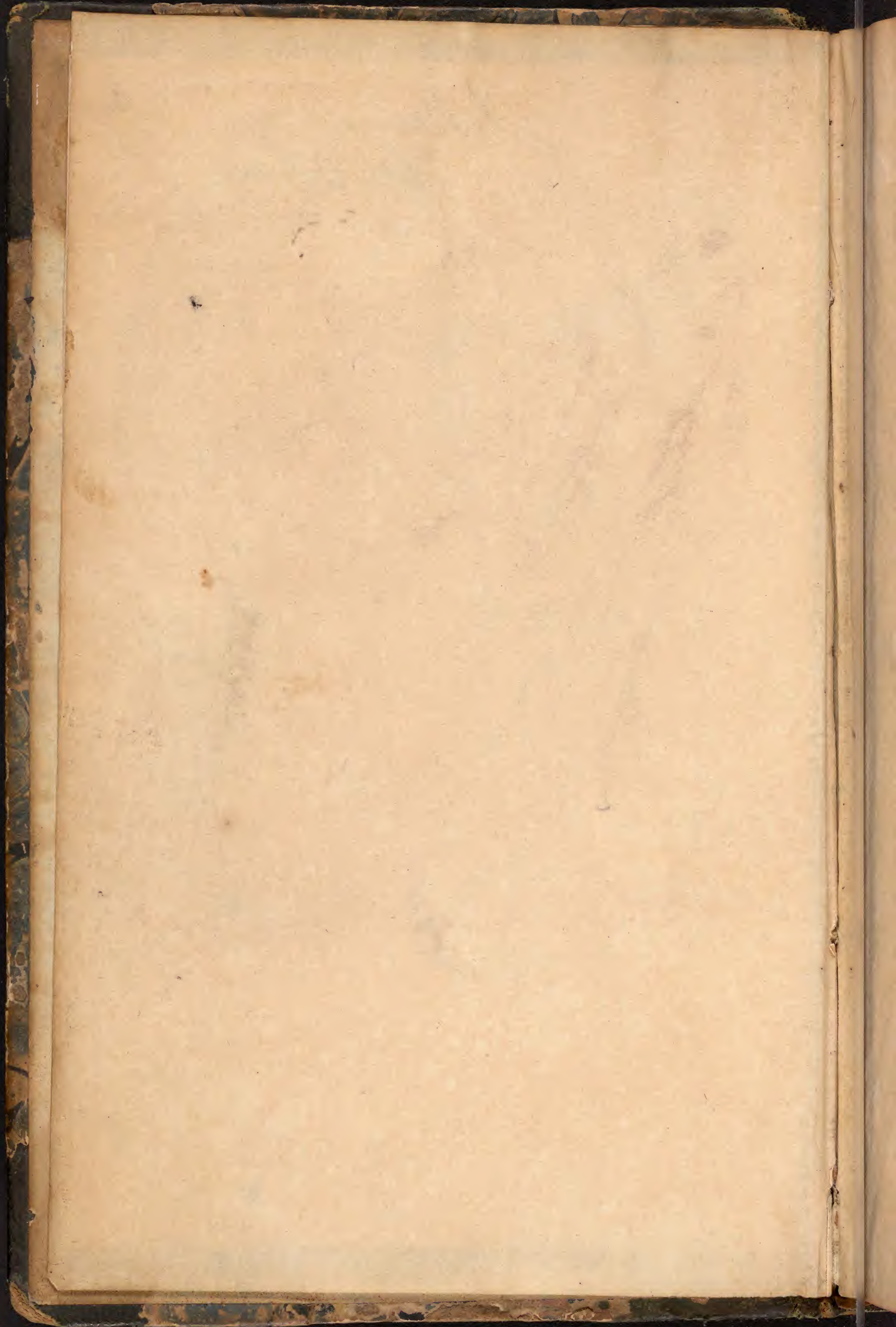
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NATHANIEL CHAPMAN M.D.

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Notes from
the Lectures of
Nathaniel Chapman, M.D.
Professor of the Practice of Medicine
in the University of Pennsylvania

In the year 1844-1845

L. Garrison
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Notes from
The Lectures of
Nathaniel Chapman M.D.
Professor of the Practice of Medicine
In the University of Pennsylvania

In the year 1818-19-20,

L. Lawrence
New-Jersey

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On the Practice of Medicine.

The Practice of medicine is by far the most interesting and important part of our science. It is that point to which all our inquiries have been directed, and to which accordingly we are to apply the principles taught in Physiology, Pathology & Therapeutics.

Even at this early stage the question presents itself, in what way may diseases be arranged? - Ever since the time of Sydenham it has been the custom with one or two exceptions, to arrange them on the principles which have been adopted with regard to objects of natural science - To the Classification of diseases the name of Nosology has been applied. It is not my design to occupy your attention with the numerous schemes of this description which have been introduced upon us. Each of them possess some share of merit, but the whole are characterized by gross errors and obvious defects -

In every point of view the best perhaps which has been delivered to us is that of Cullen.

Aware of the imperfections of all Nosological arrangements, the celebrated Brown, in the bold spirit of innovation which so eminently belongs to him, made a rude denunciation of the nature and tendency of the practice. The light in which he viewed the subject seems marked by extreme simplicity - No other difference could he perceive between the various morbid affections, than as related to the intensity of excitement - Diseases he ranked under the heads of Sthenic and Asthenic or those of direct and indirect debility -

Notwithstanding the credit of originality which has been given to him he has slender pretensions to be considered as the author of this theory - To the medical methodists of antiquity who attributed all diseases to too great rigidity or laxity of fibre, he is undoubtedly indebted for the primary suggestions of this hypothesis.

Need I inform you that our own school has afforded an instance of still more intrepid generalization: denying altogether the plurality of disease it becomes a part of this new system to put down entirely all nosological arrangements

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as impracticable & highly pernicious -
 But this exposition has been urged somewhat
 intemperately - No one sees more clearly than
 myself all the defects in the classifications
 which have been attempted - Candour how-
 ever compels me to confess that none of
 them is wholly without use, as they intro-
 duce order & perspicuity into a science.
 It is not fair to raise objections against a
 practice from its abuse - This is at all times
 dangerous, and even sacred subjects might
 thus be rendered contemptible - Every arrange-
 ment of natural objects of which no one
 doubts the advantage, might in the same
 way be improperly exposed to ridicule -

What for instance can be found more incon-
 -gruous & absurd in any system of nosology
 than as has been done by Linnaeus, the placing
 in the same class the human being and
 the bat - the first and nearly the last link
 in the chain of animated nature -

But does this unfortunate association lead
 any reflecting man to deny the utility of clas-
 -sifying animals, or even of the particular
 arrangements of that naturalist -

What is the most advantageous method of
 systemizing in medicine, is difficult to determine.

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But that some order is necessary is univer-
 -sally confessed - Even those who are lauders
 in their condemnation of nomenclature have tacitly
 conceded its necessity by adopting the names &
 divisions which it has established. To arrange
 diseases according to their affinities as has
 generally been done into classes, orders, genera
 species & varieties, appears to me altogether ar-
 -tificial & perhaps impracticable. From the
 difficulty of adjusting the degree of consanguin-
 -ity or relationship between the different kinds
 of morbid affections - Endless disputes have
 arisen on this subject, and have been condu-
 -cted with little of that courtesy which should
 always characterize philosophical discussions.
 It occurred to me that diseases might be
 arranged according as they appear in different
 systems of the body. That there are defects in
 this method cannot be denied, but on the
 whole I believe it to be the most natural,
 simple, & practically useful - I have therefore
 after mature deliberation determined to adopt
 it - Limiting the term system to a com-
 -bination of parts which have a similarity
 of structure & occur in the same uses -
 The following may be stated -

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They are then in numbered list

1st Circulatory - Consisting of the Heart & blood vessels -

2nd Respiratory - The Lungs, & appendages -

3rd Digestive - Stomach & alimentary canal.

4th Absorbent - Lacteals and Lymphatics -

5th Secretory - Glands -

6th Sensitive - Nerves, brain & Spinal marrow -

7th Muscular - Muscles, Tendons, Aponeurosis &c -

8th Cutaneous - Skin, cellular membrane and Rete mucosum -

9th Osseous - Bones & appendages -

10th Generative - The organs of generation in both sexes -

It will be easy under these heads to comprehend all the diseases to which our nature is liable without any reference to their alliance or affinities. But though I reject the old arrangement I shall however retain the names - These are sufficiently expressive & having been generally adopted are become the language of medicine. To change is always more or less an evil, and I am not sensible that in any case it is more inconvenient, than in the nomenclature of the sciences -

Diseases of the Circulatory System

OF FEVERS

I shall now commence with the diseases of the circulatory system and first of Fevers. They are by far the most common of the complaints of our nature, and as they afford general principles on which the treatment of other diseases must be founded. I shall dwell on them at some length, and with more than the ordinary minuteness. It is computed that more than one half of the deaths among the human species are produced by febrile affections alone.

What is the nature of that disease which has been denominated Fever? Ever since the dawn of medical science the question has been proposed & still remains unanswered. The febrile affections are so numerous, diversified and fluctuating, and are so much under the dominion of those causes which modify diseased action, that they perpetually shift their character & no description can be appropriated to the whole class.

Cullen who is chiefly followed in this subject, defines the Pyrexia or febrile diseases to consist in an "increased heat & frequency of the pulse, coming on after shivering accompanied with a disturbance of many of the functions, & diminution of strength especially in the Limbs" -

Now though this definition is as unexceptionable as any which have been advanced, it will not be difficult to show that hardly any symptom which has been mentioned is an universal and necessary attendant. That increase of heat is not a pathognomonic sign of fever is conceded by all - There are not indeed many cases in which the animal temperature rises much above the natural standards, and we often see instances where it is lowered - The senses are not here the proper means for measuring the degree of heat - The feelings of the individuals are often entirely delusive, so much so, that at the moment when he complains of excessive warmth he is often really colder than usual - The converse equally holds, sensations of cold often accompanying a high degree of thermometrical temperature, nor is it at all true that fevers are always preceded by a chill - This is indeed, except

[The text on this page is extremely faint and illegible due to fading or bleed-through from the reverse side. It appears to be a continuous paragraph of handwritten text.]

in some particular types comparatively 7
a rare occurrence in febrile affections -
As relates to the pulse there is every variety
as a general rule it is more than naturally
frequent in fevers, but the exceptions are num-
-erous and in certain affections where the brain
is concerned, it sinks to one half of the natural
standards. Besides by exercise & other causes
the pulse may be made to beat with much
more than its usual quickness, without impai-
-ring the health or assuming a morbid condition -
-frequency of pulse therefore is not a necessary
ingredient in fevers -

That a disturbance of the functions, &
laxitude occur in this ~~disease~~ is not denied
but they are also incident to many other dep-
-ressed conditions of the system - Hence it
follows that no one of the preceding sym-
-ptoms is sufficient of itself to denote
fever, but to arrive at a satisfactory
conclusion we must consider them all
compiled, & also other circumstances here-
-after to be related -

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Fevers are divided into Intermittent 9
Remittent and Continued

Intermittent fever consists of a number of Paroxysms, between each of which there is a complete cessation of all febrile symptoms. This cessation or Apyrexial period is of various durations, & according to its different lengths the fever has been differently named.

Thus when the paroxysm occurs every 24 hours it is called a Quotidian - If 48 hours elapse between the paroxysm it is called a Tertian - If from the remission of one paroxysm to the accession of another 72 hours supervene, it is called a Quartan - And these are again subdivided into the Double Tertian, the Double Quartan &c. - Intermittent fevers sometimes recur after an interval of 3, 6, or 10 days - sometimes only once a month - once in two months, & even at the end of 12 months and are named accordingly. Menstrua, Bi-menstrua, and Annua - Whether this be the case I shall neither aver or deny as it is of little importance & does not merit our attention.

The Tertian is the most frequent, & the most easily cured - Next Quotidian - The Quartan is the most obstinate.

The Tertian appears in the Spring, & the 11
Quartan in the Fall - Cullen says the Qua-
rtan occurs most frequently - I cannot spe-
-eak of it as relates to the place in which
he practiced - but the testimony of almost
all other writers go to prove that the Ter-
-tian is the most frequent form in which
it occurs, & we know that this is the most
frequent form of Intermittents in the
United States -

A paroxysm of an Intermittent is divided into
three stages - *Viz.* - The cold, the Hot, and the
Sweating. The cold stage commences with lan-
-guor, a sense of debility, & sluggishness in mo-
-tion, yawning, stretching, and an aversion to
food. The face and extremities become pale,
the features shrink, the bulk of every external
part is diminished. The skin is covered with
cutis anserina, & appears constricted as if cold
had been applied to it. At length the pat-
-ent feels very cold, and universal rigors come
on: the Respiration is short, hurried and
anxious; the Urine is almost colourless and
small in quantity; sensibility is greatly im-
-paired, the pulse is small, frequent & often
irregular. In some instances drowsiness &
Stupor have prevailed in so high a degree

as to amount almost to Apoplexy -

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These symptoms having continued one or two hours gradually abate. & the hot stage commences with an increase of heat over the whole body - the face becomes flushed, dryness of the skin with thirst, pain in the head, throbbing of the temples, anxiety & restlessness - the respiration is fuller & more free, but still frequent, the tongue is furied, the pulse has become more regular hard & full, & sometimes delirium arises

Sweating Stage - The symptoms of the hot stage as well as the cold, having continued sometime, a moisture breaks out on the forehead, & by degrees becomes a sweat, which extends over the whole body: the heat and thirst abate, the urine deposits a sediment, respiration becomes free & full, & most of the functions are restored to their natural state - the patient however is left in a weak & wearied constitution -

These are the usual circumstances attending the paroxysm of an Intermittent fever.

but there are some anomalies which should not be overlooked - We are informed by Cleg^{den}horn and Cleg^{den}maur, that some paroxysms are not ushered in by a cold stage, and that others

6 In some instances the two stage process
the cold

+ appears during other days

The clearness with which it is usually commonly
connected with the weather is a common
feature of the disease. It is usually accompanied
by a sense of coldness and a feeling of
chilliness. The patient usually complains of
aching in the joints and a general
feeling of weakness. The temperature is
usually elevated. The pulse is usually
rapid. The disease is usually accompanied
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chilliness. The patient usually complains of
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feeling of weakness. The temperature is
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rapid.

have not been accompanied by the hot. ¹⁵
We are further informed by Jackson that the
Paroxysm of an Intermittent fever has gone off
by a copious discharge of urine - or by Alvine
evacuations without any perspiration -

Another anomaly is that the disease has been
known to locate itself in some particular part
of the body - An extremity has been known to
go through all the stages of a paroxysm, the
rest of the body remaining free from the attack.
I have known Inflammation of the eyes wh-
ich was cured by the usual remedies for an
Intermittent fever - Dr Rush has been
highly ridiculed for speaking of ~~an~~ fever and
ague of the eye -

Remote causes of Intermittents
Much controversy has existed as to the causes
of Intermittents, but it is at least generally
admitted that they mostly arise from Marsh
Miasmata - Franciscus an Italian was the
first who referred them to this cause, and
since his time, the accuracy of his observa-
-tion has been fully confirmed - As we have
already remarked in our Pathology we are
by no means acquainted with the nature
of Marsh Exhalations, but we know

o and animal matter

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The occurrence in the stomach of a small quantity of animal matter noticed as a cause of indigestion has been
mistaken for the effect of indigestion. It is not at all probable
that the animal matter is the cause of indigestion. It is
more probable that the indigestion is the cause of the
animal matter. The animal matter is the result of the
indigestion. It is not at all probable that the animal
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indigestion. It is not at all probable that the animal
matter is the cause of indigestion. It is more probable
that the indigestion is the cause of the animal matter.

that they arise from vegetables in a
state of Putrefaction -

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In speaking of the causes of Intermittents we
should not forget that they can be wafted to
the distance of 8 or 10 miles in sufficient quan-
tities to produce disease. No fact in Pathol-
ogy is better established than this. Besides Ma-
rish Miasmata there are other causes which
produce Intermittents: whatever debilitates the
system greatly, mental anxiety, Abstemious
diet & excessive evacuations. Next to Marsh
miasmata, cold is the most powerful cause
in producing Intermittents, especially when
accompanied with moisture, as damp rooms
damp beds, damp cloths &c

Treatment of Intermittent Fevers.

The treatment of Intermittents is divided
into two kinds. Those applied during the
paroxysm, and those during the Apyrexial
period. The treatment of a paroxysm is
taught us by nature, & we must endeavor
to imitate the example. Call a patient to a par-
oxysm during the cold stage, we direct him
to be placed in a warm bed, & topical ap-
plications to be made to the feet, such as
warm bricks, or bottles filled with warm

water, and if necessary to be applied to the
other parts of the body - You also order warm
drinks, such as chamomile or balm tea, and
if stimuli are required we give wine whey.

It has been the practice with some to
give opium during the cold stage; this
practice originated with Dr Trotter, who says
that if 20 or 30 drops of Laudanum be given
at the commencement of the cold stage, it
will arrest the progress of the paroxysm all-
together. - My own experience bears com-
plete testimony of this practice: the adm-
-inistration of opium is generally followed
by the most beneficial effects - The dose
of Dr Trotter answers generally very well
yet in some cases 40 or 50 drops are required.
It arrests the rigor of the body, creates an
agreeable warmth & relieves the affections of
the head, which are extremely distressing to
the patient - It is now 30 years since the
application of Lammquets was introduced by
Mr George Hellie, to prevent the cold stage
and render the whole paroxysm milder. The
parts to which they were applied are the thighs
of one side & the arm of the other -

Mr Hellie commends the practice very
highly; he says if applied during the cold

Stage, the hot will be induced in three ²¹ minutes - & if applied before the coldest stage it prevents it altogether, & when the cold stage thus shortened or prevented the succeeding hot one will be shorter & milder. The Modus Operandi of this practice is very intelligible, by confining the circulation to a narrow compass, the blood is concentrated near the vital organs which thus possess more power in resisting or putting off the attacks of the cold stage.

In practice however I have never found the application to answer the high encomiums lavished on it by the author. During the cold stage the best remedy that I have found is an Emetic - In the Hot stage two indications are to be attended to, 1st To remove the irritation 2nd To promote perspiration -

The Irritation arises from an accumulation of bile in the stomach, & is to be removed by an Emetic; but in many cases and interference is superseded by a spontaneous vomiting. When this occurs all we have to do, is to assist nature, by copious draughts of diluent drinks, such as Chamomile Tea, Balm tea, &c.

The second indication we are

to answer by Diaphoretic medicine, 23
By consulting the various European writers
we find that their greatest confidence is in
James's Powder - It certainly is an important
remedy, and where it can be procured it is no
doubt a very useful medicine, But it is no
longer among and remedial, & as it has been
superceeded by others quite as useful, and
less difficult to procure, its loss is not to be
regretted - In country practice the Eupoa-
-torium Perfoliatum is extensively used &
is among the most certain & powerful dia-
phoretics I know of; it is generally given
in form of tea.

Many Practitioners, & especially those
of warm climates are in the habit of gi-
ving opium in the hot stage - Dr. Lind
who first introduced it in this stage says,
that the administration of a dose of Opium is
always followed by a complete solution of
the paroxysm, & moreover that it is a better
remedy than the Bark, as from its use there
is less danger of congestion in the large ves-
sels.

Notwithstanding the authority of
Dr Lind & others I am not disposed to reco-
mmend this practice to you: determining

From my own experience I should say ²⁵
that the use of Opium is always followed by
an aggravation of all the symptoms of the
hot stage: the fever runs higher & the pain
in the head is greatly increased. - It is hard
to doubt so high authority as Dr. Linck - and I
think it is probable that in the hot climates
it may be good, but in this part of the world
you will find the effects I have stated cor-
-roborated - Whenever I use it, it is with Ip-
-ecaci, in the form of Dover's Powder. - In
this way it may be given with advantage
The Diaphoretic that is peculiarly adapted to
the hot stage is the acetate of Ammonia, or
Sp. Mindereri - the dose is a table spoon-full
to be repeated if necessary. - It is preferable
to the other Diaphoretics in being more agree-
-able to the stomach & more diffusible in
its effects. - and in cases of nausea it may be
retained when the others would be rejected.
The practice I have laid down answers to all
ordinary cases of Intermittents. - But when
they are accompanied with inflammatory
symptoms, the treatment of course is some-
-what different. - In the Spring they are always
more or less inflammatory, and also during
the prevalence of an inflammatory Epidemic -

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The first of these is the
fact that the human mind is
not a blank slate at birth
but is filled with ideas
and feelings which are
the result of the influence
of the environment. This
is the basis of the theory
of the mind which is
the foundation of the
science of psychology.
The second of these is the
fact that the human mind
is not a single entity
but is composed of many
different parts which
are all connected together
in a complex system.
This is the basis of the
theory of the mind which
is the foundation of the
science of psychology.
The third of these is the
fact that the human mind
is not a static entity
but is constantly changing
and developing. This
is the basis of the theory
of the mind which is
the foundation of the
science of psychology.

There is no difficulty however in ²⁷
detecting this form of the disease, by the symptoms;
which are, a strong full ^{hard} pulse, laboured respi-
-ration, severe local pains in the head, breast, &c.
The treatment in these cases consists in copious
venesection, followed by emetics, & mercurial
purges, & the milder diaphoretics such as Sp.
Mindereri &c; -

We come next to consider the
management of Intermittents during the
Apyrexial periods - These are likewise of
two kinds 1st Those which are suited to the
entire intermission, 2nd Those which are
applicable to the approach of the paroxysm

Of those remedies which answered the first
indication, none is so celebrated as the Peru-
-vian Bark - It has long been employed and
its superiority still continues to be acknow-
-ledged amidst the fluctuation of opinion &
changes of practice in other diseases -

At the present time little difference of
opinion exists with respect to the rules to be
observed in the administration of this medi-
-cine - - It was thought improper to use
it at an early stage of the disorder, as the oc-
-currence of a number of paroxysms was de-
-clared necessary to throw off the morbid

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matter upon which they supposed the
disease to depend. This was a great mist-
ake as has been proved by modern practice,
which is diametrically opposite to this - for
the earlier the Bark is employed the more
complete & speedy will be the cure -

The only circumstance that can delay
the administration of the Bark is the cond-
ition of the alimentary canal, and some-
times of the system generally. But doubts ev-
en exist with regard to preparing the system
at all for the reception of the Bark. Some
say that it is totally useless, & that the most
happy effects have resulted from the immedi-
ate use of it. Though this may be admitted
yet as a general rule it is hazardous to employ
it before vomiting with Tart. Emel. or pur-
ging with Calomel. As preparatory to the
use of the Bark in modern times, Emetics
have given way to mercurial purges; these
will answer very well in some cases, but
frequently Emetics are indispensable, not only
on account of the evacuation they produce
but because they are absolutely necessary to
make a powerful impression on the sys-
tem in order to break the morbid con-
-tinuation upon which the disease depends,

Of the efficacy of Emetics my own practice
 bears the most ample testimony; but be-
 sides Emetics, Vfs is imperiously demanded
 in some cases - At the commencement of
 the disease it is more or less inflammatory,
 and without bloodletting, Bark is rejected
 from the stomach & is of no use, and if it
 be retained serves only to aggravate the
 disease - My rule is therefore always to
 withhold the Bark until the system is
 prepared for it by proper evacuations - By
 this course I am persuaded that it will
 display such certainty of effect as almost
 to entitle it to its former name of Speci-
 fic -

Intermittents are often asso-
 -ciated with visceral obstructions; when this
 is the case the Bark should not be employed
 except when there are no inflammatory sym-
 ptoms present. But when acute pain
 is seated in the obstructed viscera it will
 be injurious - The treatment here consists
 in blisters over the painful part and
 a slight evacuation: this will cure both
 the obstruction & the original disease - Blood-
 -letting is never to be neglected, when the
 pain & inflammation are so great as to require it,

At one time it was doubted whether Bark
should immediately precede the paroxysm.

I should scrupulously avoid it at the moment of attack as it increases the fever, & causes much distress. Some go so far as to say that no remission should be observed in its use.

Dr Clark & others are of this opinion: but I have always seen that when the slightest febrile symptoms existed, Bark always aggravated them. The universal rule now is immediately to discontinue this remedy as soon as even the accession commences -

The Bark is given in substance in several vehicles, such as wine, Spirits, milk: &c. Milk I think the best, the dose from $\mathfrak{z}\mathfrak{j}$ to $\mathfrak{z}\mathfrak{i}\mathfrak{j}$ taken as often as the stomach will bear it - In the West Indies it is

given in the dose of $\mathfrak{z}\mathfrak{j}$ in the morning, & then omitted altogether - I have imitated this practice with great success in the person of the late Mr Dallas of this city - In this way its powers are much greater than when given in small ~~and~~ repeated doses - But perhaps there are few stomachs that can bear so large a dose - The fact however is an interesting one, & should not be neglected. In some persons the stomach is so irritable

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as not to bear the Bark in the smallest doses; in such cases it is proper to combine the Bark with some aromatic, or other substance that will render it less offensive. The Virginia Snake root is the best addition. This combination of the Bark & Snake root has often effected a cure where Bark alone has failed. This formula is particularly adapted to children & delicate women.

Bark sometimes purges, when this happens it should be combined with small doses of Opium or Laudanum. When it produces constipation it should be combined with Rheubarb.

Intermittents are sometimes connected with an acrid state of the stomach; here the Bark should be combined with magnesia or an alkali. This combination is said by an English writer to act more powerfully in arresting the progress of the disease than the Bark alone. I do not know this by my own experience, but it is evident that effects are often produced by combination which cannot be obtained from either alone.

Notwithstanding the various modes in which Bark has been prescribed to

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1819

make it set easy on the stomach, cases 37
often occur in which we cannot administer it
in any shape without its being rejected im-
mediately; and there are also some cases in
which it passes off by purging, & therefore
produces no salutary impression on the sys-
tem. In such cases injections of the
Bark have been recommended. I have
never obtained any good effect from it, ex-
-hibited in this way except in children, it
being difficult to administer it to adv-
-antage in this form, from its disagreeable
nature, & the necessity of frequently rep-
-eating the Clyster to produce the desired
effect.

It is probable I may have derived some
advantage from this mode of using it,
but I cannot say that it will arrest the
progress of this or any other disease. Besides
the irritability of the rectum is so much
increased by the frequent repetition of the
injection that the Bark at length cannot
be retained for a moment. But as
cases may occur to you in which it is nec-
-essary to attempt a cure in this way,
I shall give my mode of using it,

R/ Pulv Cort: Cinchon - — Ziviliij³⁹

Mucilage Gum Arac & starch q/s.

Let the quantity of the mucilage or starch be as little as possible, that it may not from its bulk excite the action of the rectum & thereby be immediately discharged. To lessen the irritability Laudanum may be added.

The external application of Bark has been recommended; the modes of applying it are various. Cataplasms of it have been applied to the region of the stomach, & to other parts of the body. I have never tried them nor do I think them of much efficacy. It is said that cures have sometimes been made by immersing the feet of the patient in a strong decoction of Bark. In this way I have used it with great effect.

Oak Bark is likewise a useful remedy in Intermittents, & has been applied externally in the same manner as the Cinchona.

Dr. Darwin states that cures have been effected by sprinkling the sheets of the patient with powdered Peruvian Bark, but to believe this even on the authority of Dr. Darwin requires no little stretch of credulity; for my part I do not believe it. — There is another and a more efficacious way of applying

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Bark to the surface in a dried state viz: 4th
by means of the Bark jacket, which is to be
worn for a considerable length of time - I
have derived great advantage from it in se-
-veral cases of delicate women & children:
- but most generally it is incompetent to the
cure -

The *Modus operandi* of Bark externally
applied is very intelligible: It first produces
a tonic impression upon the part to which
it is applied; this is communicated by
means of Sympathy to the Stomach, which
being thus strengthened & invigorated operates
upon the whole system, breaking the morbid
associations upon which the disease depends

Next in efficacy to the Peruvian Bark in
the cure of Intermittents is the Aristolochia Serp-
-entaria. This was long used by Sydenham with
wine as a general stimulant: He says where
wine is necessary, Serpentaria is amply po-
-werfull: but whether it is adequate (alone) to
the cure of Intermittents I shall not say, but
I can answer for its efficacy in combination,
Complete cures will be often effected when they
have in vain been attempted by the Bark
alone: this has been satisfactorily proved
by universal experience -

the first of the two is the most important
the second is the most important
the third is the most important
the fourth is the most important
the fifth is the most important

the sixth is the most important
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the sixteenth is the most important
the seventeenth is the most important
the eighteenth is the most important
the nineteenth is the most important
the twentieth is the most important

The following preparation of *Serpentaria* 43
has been ascertained to possess peculiar powers, &
it is well worthy your attention -

R^y - *Serpentaria* ----- ʒi
Pulv. Carb. Peru ----- ʒss
Carb. Soda ----- gr xxx
M. f. Pill IV -

The patient may
take this through the course of the day. Why
this combination should possess such pre-em-
-inent powers I cannot concur, but we all
know that effects are sometimes derived from
a medicine, when combined with another, that
cannot be obtained from it alone -

The formula I have given you has
been used in this country for more than half
a century, and it has again & again wrought
the most important cures, & I give it to you
with the greatest confidence -

The *Eupatorium Perfoliatum* is a very
important medicine in the cure of Intermit-
-tents: its powers are great, and it may be
so managed as to be Emetic, Diaphoretic
and Tonic. By its combined diaphoretic
and tonic powers, it is peculiarly adapted
to those cases of Intermittents where the
intermissions are not distinct and where

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the Bark is inadmissible - It is given 45
indiscriminately at all stages of the disease &
is used almost exclusively by my friend Dr Hosack
of New-York.

There is another species of
this plant, the Eupatorium Pilosum, which
is also used in intermittents, but is not so
powerful as the Eupatorium perfoliatum.

As a remedy in this disease we should not
overlook the Century or Chroma Angularis
every part of this plant is medicinal like the
Eupatorium: it is used where the Cinchona
is inadmissible. Like the preceding remedy
it is both Diaphoretic and Tonic, & like it
may be used during the paroxysm or a post-
-fixal period. An infusion of this plant
may be given as often as the stomach will
bear it.

The next I shall mention is the Dogwood
of this we have two species. Viz: the Cornus
Florida. & the Cornus Sericea; the latter is a
small shrub growing in marshy grounds
called Red Dogwood - The former is well known
to you all - The Bark of this tree has been
well examined by a graduate of this University
and found nearly equal to the Cinchona
It is given in powder in the same dose

as the cinchona, and likewise in
decoction - 47

Nearly allied to this is the Prunus
Virginiana or wild cherry tree. I have
no doubt that it may be useful; country
practitioners speak favorably of it -

The Prunus Coccillatus or Black Alder has
also obtained a place among the remedies
used in Intermittents - I know nothing of
it from experience but it is said to be a
useful remedy -

The several species of Oak are
important remedies in this disease: the
bark of the White Oak is most nearly allied
to cinchona in its chemical properties.
But it is not so powerful as those of the
Black & Chestnut Oak - I have not em-
ployed them myself, but they are said to
be very valuable medicines in Intermitt-
ents & are given in the same form and
doses as the cinchona -

All the species of and Willow are
good as tonics: I attended a considerable
number of experiments made with them
in the Philadelphia Almshouse which
proved their efficacy in Intermittents; they
are given in decoction in as large a quantity

It is a common error to suppose that the
theology of the Church is a mere collection of
dogmas and doctrines, and that the only
way to attain to the truth is by a study of
theology. But the truth is that the Church
is a living organism, and its life is in the
love of God and of our fellow-men. The
theology of the Church is not a mere collection
of dogmas and doctrines, but a living
faith which is the basis of our life and
action. Theology is the study of God and
His will for us, and it is the foundation
of our faith and hope. Theology is the
study of the life of Christ and the life of
the Church, and it is the basis of our
faith and hope. Theology is the study of
the love of God and of our fellow-men, and
it is the basis of our faith and hope. Theology
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life of the Church, and it is the basis of
our faith and hope. Theology is the study
of the love of God and of our fellow-men,
and it is the basis of our faith and hope.

as the stomach will bear -

49

The Poplar Bark was used by Dr. Rush in Intermittent fevers; we are informed by his paper on this subject that he considered it next to the Cinchona in the treatment of these diseases - After this publication many practitioners employed it, & though the reports respecting it, are somewhat contradictory its efficacy has not been denied - Dr. Barton thought it efficacious - the mode of using it is in decoction & substance - like the Bark it is best in substance - These remedies which our country affords though not all possessed of great powers, being easy of access & indigenous should not be unknown to you

The Cortex Angustura was introduced about 25 years ago, at first it promised to supersede the Cinchona, but though only 20 years in use it has completely lost the confidence of Physicians; it has however been again restored & much praised in the English journals. During the last twelve months it has been used in this City & found to be well adapted to cases where there is great irritability of the stomach, &

the Cinchona cannot be retained.

I have frequently found it useful in cases of Intermittents associated with Dysentery - the dose is from 20 to 30 grains.

Not many years ago was introduced the *Swietenia Mahoganio* or Mahogany but appears not to possess any very great powers - it is however pretty well adapted to cases similar to the one above mentioned. By consulting medical writers you will find that many substitutes are proposed for the Bark - especially the *Cinchona Caribbea* & *Jamaicensis* - They are doubtless possessed of some powers but I know nothing of them from my own experience.

The *Quassia* is a most grateful bitter to the stomach & is perhaps well suited to the weaker Intermittents & those associated with Dysentery - but it is by no means adapted to the confirmed cases of this disease.

Gum Kino among other remedies has been recommended in the treatment of Intermittents. It was first used by Dr. John Fothergill of London - and his reports on this subject are so

flattering that we might be induced 53
to believe that it would supersede the cinch-
-ona. It has been imitated in the use
of it to a considerable extent in this coun-
-try, but we are compelled to remark that by
itself it is feeble & inefficient, being totally
incompetent to the cure. It has sometimes
proved a powerful remedy when given in
the following combination -

R^y Gum Kino ----- ʒij
Pulv Gentian ʒss
Pulv Gum Opü gr ij

M^{ft} Pulvis ~~XII~~ one to be given every two
or three hours.

This formula seems to be particularly
adapted to Intermitents accompanied with
certain local affections -

Carbon is the last of the vegetable rem-
-edies I shall mention. Its recommenda-
-tion is only recent but comes to us from
such strong authority that we are forced
to believe it possesses no common power in
this disease. It has been employed for the
last 12 or 18 months by Dr Caldwell Physician
General for the Mediterranean; his account
of it is to be seen in the 10th volume of the
Medical and Surgical Journal.

After employing it in a number of cases he, ⁵⁵ seems inclined to think it equal, if not superior to the Peruvian Bark. According to his statement its general effects are to destroy the unpleasant taste of the mouth, to allay sickness & to stop vomiting, to promote digestion, & to invigorate the appetite: it is apt to produce slight constipation. He was not particular as to the choice of the wood, being only careful to select the best shelled pieces: the number of patients cured by it within his knowledge was 105. & It had become so popular a remedy that the invalids resorted to it without the advice of a Physician.

If one half of his statement will stand the test of future experience it must indeed be a valuable medicine in this fever.

Sulphur of Pot has been not a little employed in Intermitents: about 20 or 30 years ago it was introduced by Dr. ~~Fraser~~ ^{Fraser} who prescribed it in the dose of ʒi in ardent Spirits, & in this way it is still administered.

At one time it was my conviction that the efficacy of the prescription depended on the Spirits but within the last 2 or 3 years I have had so much evidence of the

powers of Sulphur that I can no longer doubt. 57
them - In this City it is a very popular rem-
-edy, & in the suburbs of the town which is in-
-habited by the Low Irish the cure of Fever
and agues rests entirely on it - It may be
given either in milk or Spirits, in either
way the effect is the same - I think it a
very valuable medicine in all diseases that
have a tendency to a periodical type -

Sulphate of Copper. This has been
highly extolled by Dr Adair of London, and
Monroe of Edinburgh - The latter informs us of
its efficacy in many of the obstinate cases, which
-ich occur in Holland & the Netherlands - It
is praised by all who mention it, but it is
best suited to old & protracted cases, espe-
-cially to the Quarters - The mode in which
Monroe used it, & which I have adopted is
as follows -

R/ Sulph. cupri	—	gr x
Ext. Cinchoni	—	ʒv xxxij
Syrup	—	℥ss

Mf. pile No 16 one to be taken every
3 or 4 hours -

Cuprum Ammoniatum. has also been
recommended in some periodical diseases,
Epilepsy &c - It would seem also adapted
to obstinate Intermittents -

The preparations of the nitrate are on the same footing ~

Sulphate of Alumina is known to most of you, & has been long used in Intermittents. By some it is thought to possess great efficacy. - Cullen used it combined with nutmeg but found it still too irritating to the stomach. Whistl. Lind whose experience is ample declares that in this way it is next in virtues to the Bark. - From my own experience I have not much to say on this subject. - I have seldom used it, & never to much advantage, but we are nevertheless informed that it has been proved to possess no common powers in the Remittent & Intermittents of Carolina.

Chalmers also used it in Billious fevers. Its efficacy has been confirmed by Dr Darwin though he says it should be restricted to those cases which are associated with Bile con-plaints, especially the weaker forms of Dyspepsia & Diarrhoea.

Saccharum Saturni, has been added to the catalogue of remedies in this disease, & many have great confidence in its efficacy. - At one time it was in great repute with some of the Practitioners of this city especially Dr Barton, who with the exception of Arsenic placed

it at the head of all remedies in the cure of Intermittents, but it appears that the representations on the subject have been too strong. For I have repeatedly used it, but with no advantage whatever; & from my own experience I would say that it ought to be placed at the foot of all the remedies I have mentioned.

ARSENIC is nearly allied to the former; by a general estimation it is thought to be entitled to a place next the Bark - That it possesses powers I shall not deny, but they have been greatly overrated, & whoever expects that it will cure Intermittents will be disappointed very often - Either owing to the want of power or the loose manner of prescribing it. In all weak forms of the disease whether of a Syphus tendency or arising from weakness of constitution or debauch, it is totally insufficient or perhaps absolutely injurious. Indeed this we ought to anticipate from its known effects upon the system -

Bark would seem from its tonic powers to invigorate the system, & to render it more capable of combating with disease - But Arsenic though placed among the tonics has no claims to be associated with them: during its operation it produces languor & debility,

both as regards the stomach & whole body 63
and its remote effects, are pale countenances,
extreme prostration of strength & oedematous
swellings. To these forms therefore it
must be totally inadmissible. Even when
administered under circumstances the most
propitious it generally fails, except in chil-
-dren, when it is generally successful.

Arsenic is very prompt in its effects,
if therefore it has been used 6 or 8 days with-
-out showing any sensible effect it should
be laid aside, for if longer continued it will
very generally prove mischievous. We have
lately learned from good authority that a
combination of Bark & Arsenic will overco-
-me some obstinate cases which will yield
to neither of them alone. I think this
practice sound, & have adopted it in several
cases & have derived the most decisive adv-
-antage from it. The Arsenic prepares the
system for the Bark which is now capable
of making a more powerfull impression
upon ~~the system~~ it could before, & the most
obstinate cases give way to it. We should
subject our patient some days to the use
of Arsenic, & then administer the cinchona.
The practice as yet has not been largely

imitated, but it may prove highly
beneficial --

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Spiders web. Not long ago this very
extraordinary remedy was introduced in the
cure of Intermittents by Dr Jackson; we
knew however that the Spiders web & Spiders
were long ago spoken of in the cure of Interm-
ittents, but it is only lately that our atten-
tion has been particularly directed to this
practice. -- Dr Jackson informed me that the
cob web is decidedly the most efficacious rem-
edy that he has ever employed in intermit-
tent fevers. He gives it in the dose of 2 gr.
rubbed up with a little mucilage so as to
form a pill: it produces a most agreeable an-
odyne effect, causes a glow over the whole body
and quiets corporeal irritation as well as men-
tal inquietude.

It is given during the Apyrexia & also
through all the stages of the paroxysm. Dr
Jackson also informed me it was highly use-
ful in nervous diseases, being superior to
Opium. Whether these encomiums have
been lavished with justice I cannot say. Dr
Jackson is a distinguished Physician in England,
& the remedy is worthy your attention. It is a
subject well calculated for an inaugural Essay.

These are the remedies most celebrated in Intermittent fevers - It would be impracticable to point out in a course of Lectures the particular cases to which they are adapted; much therefore will depend on your own sagacity & discrimination in the application of them -

In enumerating the remedies proposed for this disease I have omitted to mention one which though of no great importance should not be overlooked - I allude animal Gelatine - It early 10 or 15 years have elapsed since this was first introduced by the French Practitioners who strenuously recommended it - Their method of using it was in the form of Glue: whether it really possesses the powers the ascribe I cannot say, but lately they have retracted all the praise they formerly bestowed on it -

Recently it has been employed with success in this city, in the form of calves Feet Jelly - One of our oldest and most experienced practitioners by an exclusive use of this remedy, effected a complete cure on the person of his daughter - which for a month had resisted every other treatment - Whether this is to be a solitary cure

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or whether the article really possesses 69
the virtues attached to it, must be submitted
to the decision of future experience.

To what I have already said of the
treatment of Intermittents I shall make a
few additional observations.

Sometimes cases will occur that are so
very obstinate as to resist all the remedies
I have mentioned; and when this is the
case, it is fair to conclude that the disease
is kept up by visceral obstruction, or by a
habit so confirmed as to require the most
powerful impressions on the system to re-
move it. Then we must appeal to mer-
cury; - It is now more than 100 years since
this medicine was used in these diseases
and ample experience has ascertained it
to be most decidedly efficacious. To obtain
its full effect we must gradually introduce
it into the system, & keep up a gentle Sty-
-alism for two or three weeks -

As a substitute for mercury Blisters
have been recommended, to be applied
to the extremities, care being taken not too
hastily to check the discharge -

They act upon the same principle as
mercury; they produce upon the parts

[Faint, illegible handwriting on aged paper with significant staining and foxing.]

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to which they are applied a strong 71
impression, which is continued to the stom-
-ach & thence over the whole body, produ-
-cing a solution of the great chain of morbid
associations which constitute the disease.

We come now to the second class of rem-
-edies - viz- Those to be used during the ap-
-yrexia or near the approach of the paroxysm.

When we expect an attack the usual practice
is to put the patient to bed, & Dr Trotter adv-
-ises to administer Opium & warm drinks
to promote Diaphoresis. Other powerful,
prompt, & diffusible stimulants have been
recommended which answer very well.

The patient should never be allowed to load
his stomach with food just before the par-
-oxysm, as it will expedite the accession &
produce violent vomiting.

Cases are recorded of the course of the
disease having been completely arrested by
fasting sometime before the anticipated
attacks; but any unusual state, or great change
in the stomach it is probable might have
the same effect.

As a powerful impression on the system
is the most prompt mode of effecting a
cure, whatever is capable of doing this has

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sometimes removed it, as Lead, Gmij &c, 73
But to Emetics the most astute will
often very readily yield; The Tartarized
Antimony seems to be the best: The effect
of these is not only to evacuate the Primæ
viæ but to produce a strong impression
on the stomach & whole system, & thus
prevent the paroxysm. A blister applied
to the region of the stomach has had the
effect of putting off the paroxysm...

I have now finished my
remarks on intermittents fevers - they are
often very intractable & difficult to manage
and are not unfrequently the cause of other
diseases. Thus their immediate effect are
to degenerate into continued fevers, especially
Typhus, & to produce Hydrocephalus. -

Intermittents in children are very often the
cause of the latter, Hydrocephalus is often
the effect of miasmata also

The Miasmata effects are congestion & schi-
-rous of the great viscera; leading to jaundice
Dropsy &c. - No opinion is more erroneous
than that of the beneficial tendency of In-
-termittents: It is still a favorite dogma of
of the adherents of the Boerhaave's system
that they produce the most salutary effect

13
The first of these is the
fact that the mind is not
a passive organ, but an
active one. It is not
merely a mirror, reflecting
the world as it is, but
it is a power which
creates its own world.
The second is the fact
that the mind is not
a single entity, but a
complex of many
different faculties.
The third is the fact
that the mind is not
a static entity, but a
dynamic one, which
changes and grows
throughout life.
The fourth is the fact
that the mind is not
a purely individual
entity, but a social one,
which is shaped by the
environment and the
company of others.
The fifth is the fact
that the mind is not
a purely rational
entity, but a creature
of emotions and feelings.
The sixth is the fact
that the mind is not
a purely conscious
entity, but a creature
of unconscious processes.
The seventh is the fact
that the mind is not
a purely logical
entity, but a creature
of imagination and
creativity.
The eighth is the fact
that the mind is not
a purely individual
entity, but a creature
of shared experiences
and common values.
The ninth is the fact
that the mind is not
a purely individual
entity, but a creature
of shared dreams and
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The tenth is the fact
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The seventeenth is the fact
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The nineteenth is the fact
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The twentieth is the fact
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of shared love and
compassion.

upon the system, & it is their opinion that they ought to be allowed to run their course if unaccompanied with dangerous symptoms, that maladies are thus removed which would have resisted the powers of medicine.

Beware of adopting this opinion, it is erroneous both in Theory & Practice. We cannot deny however ~~that~~ that intermittents have occasionally cured other diseases: there are a few instances in which it has cured Gout, Rheumatism & Cutaneous diseases. They have also been serviceable in some Spasmodic & nervous diseases, as Chorea, Epilepsy, Asthma, and now often Mania, especially Melancholia.

In my Pathology I mentioned to you Dr Morgan's practice of sending his Phthirical patients where they would be exposed to Marsh Exhalations, & that those who were attacked with Intermittents derived most benefit from the change.

After the cure of Intermittents have been effected we should, as the Predisposition is still existing in the system, direct our patients to avoid all exciting causes for some time after; such as cold, Fatigue &c. and if the disease

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has been of long continuance the 11
remedies should still be administered
especially in cold & moist weather —

Remittent Fever

Is a modification of the former disease —

Cullen very properly condemns those who con-
sider ^{them} entirely a distinct disease from Inter-
mittents. They both arise from the same
cause says Cullen, & are cured by the same
remedies, and in the same person the fever
will now be remittent & then Intermittent.

This is all true but our mode of prac-
tice differs very materially in these two
diseases —

By Remittent is to be understood
a fever that abates but does not entirely
go off before a fresh attack ensues, or in
other words it is a fever in which the
paroxysms succeed each other so quickly
that the patient is never without some
febrile symptoms — It is moreover to
be observed that remissions occur at very
irregular periods & are of uncertain dur-
-ation, being sometimes longer & sometimes
shorter —

It is a frequent form of fever

2000 (1000)

in warm countries where great heat & 79
moisture rapidly succeed each other. It is
also often met with in low marshy countries
abounding in wood & water, & is most apt
to attack those who undergo great fatigue
and who breathe an impure atmosphere.

The Symptoms of this disease are precisely
laid down by an author whose account I
shall read to you. (vide Thomas' Practice) -

According to this statement it ap-
pears that this disease is sometimes inflam-
matory, sometimes Serous, & sometimes
Malignant. - But in this country it appears
under the form of an inflammatory dise-
ase & is treated as such

Treatment of Remittent Fevers

The indication in this disease is to effect
an Intermission. - Venesection is obviously
pointed out by the strong, full pulse, fla-
shed countenance, laborious respiration &
general heat. - To this Emetics are the most
serviceable & of all these Iart. Antem. is most
decidedly to be preferred, for it both evac-
uates the stomach more completely & makes
a more strong impression on it than any
other Emetic. - I make use of this observation

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Statement of the facts

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because of late the Specac: has been 81
very generally employed instead of the An-
timony...

Cathartics are also indicated to evacuate
the alimentary canal of irritable Billious ma-
-ter, & of these the mercurial are by all means
to be preferred - you will find this strongly
objected to by European writers, but in this
country they have always been next in uti-
-lity to Emetic Tartar - The other cathartics
do not sufficiently evacuate the bowels -
After Emetics & cathartics some of the mil-
-der Diaphoretics will be of great service, am-
-ong which are the antimanial preparations.
The saline draught, & the acetate of Amm-
-onia - Under this treatment you will
obtain a remission in two or three days -
but if the disease is obstinate we must
again have recourse to Emetics - A very
strong impression may be made by the ap-
-plication of Blisters to the extremities -

During the fever there are some
subordinate circumstances that claim our
attention - the heat of the surface is some-
-times so great as to require some relief - In
this case nothing is so prompt as cold
water or vinegar: they not only lessen the

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head but quiet & comfort the patient. 83

If there is much determination to the head as is often the case, which is denoted by a suffusion of countenance, a wild expression of the eyes & sometimes delirium, simply cutting off the hair in such cases has often proved sufficiently efficacious, but if the symptoms continue we must apply cold water or Ice to the head - Leeches or cups will be the most powerful remedy.

A common symptom is nausea or vomiting arising either from an accumulation of bile or some other irritating cause in the stomach - To remove the first of these the means are obvious, viz to evacuate the stomach: but for the second we must adopt a different practice - the indication here is to remove the great morbid irritation which is to be done by several means - The best of these is the effervescent draught - Mint Tea is also used, but a more excellent one is a mixture of lime water & milk - a table spoon full of each - to be given until the irritating cause ceases to act - to be taken every 20 or 30 minutes -

Deservedly celebrated is the infusion of *Serpentaria*

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Dr. Huber declares that in those cases he has never used any thing so efficacious and I also think it may be relied on, I have also used cloves when the stomach has lost much of its tone. & if none of these answer give an opium pill that has been made two or three weeks -

This dry pill will stay on the stomach when the Laudanum will be rejected, or even a fresh pill - But if all these fail as a dernier resort we must apply Sinecispisms, Blisters, & fomentations to the stomach - Injections of Laudanum have been of great service in quieting the stomach,

A remission being obtained we must now pour in the Barks, & accompany it with some aromatic decoction: but when the least symptom of fever exists the Bitters must not be employed.

As an aromatic the Serpentaria is most useful, next to this the Eupatorium Perfoliatum.

There is no greater error in medicine than too hastily resorting to Tonics - They will never prove of the smallest service until the remission is completely established, may they will aggravate the disease, if the slightest fever exists -

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Let us evacuate untill we obtain
a complete remission & then forward our
Tonics. To this rule there is only one ex-
ception, & that is when the disease has a
decided tendency to Typhus: but even then
our medicine would be rejected & we should
be compelled to resort to some other mode
of treatment.

I now proceed to treat of -

CONTINUOUS FEVERS.

So called by nosological writers. This
class has been differently arranged, by dif-
ferent authors, but I shall consider them
under two general heads, Synocha & Typhus

Synocha

This is the most confirmed Billious infla-
mmatory fever of our climate & is exee-
dingly prevalent in every section of our
country, particularly in the southern
States -

Like the fevers I have already mentio-
ned to you, this arises from marsh mi-
asmoda & various other causes. Indeed
the Intermittent, Remittent and Contin-
ued are all the same disease but of a
variety of Type - They arise from the
same causes, occur in the same season

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exchange with each other, & are cured by 89
the same remedies. In short the analogy
between remittent & continued fever is so close
that the history given already of the former
will suffice for both.

Treatment of Synocha

In entering upon this subject we are
met by a question which has been much
agitated. Can we by our remedies arrest the
progress of the Fever or can we only obtain an
abatement of its more violent symptoms?
It is contended by Cleghorn, Fordyce, and
others that the disease will run its course
and that we are not able to abate its sym-
ptoms. In support of this they appeal
to the history of several diseases, as Small
Pox, Measles &c &c. These we must acknow-
ledge will run their course, & you are
directed only to subdue the most violent
symptoms. But these diseases are by no me-
ans pertinent examples, they are peculiar
and are governed by peculiar laws: But
as regards ordinary fever we have all seen
their progress completely interrupted and
stopped by our remedies.

Every practitioner has had it in his
power to arrest cases of fever by venesection

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vomiting & purging, or by some other 91
powerfull impression made on the system.

This theory is an exceedingly dangerous one
and ought to be combatted. It derives its
origin from the dark ages of our science, &
has been perpetuated by a blind & improp-
-er veneration for ancient authority -

It is highly dangerous in as much as it
dictates a faulty practice and allows the
disease to progress untill it has got beyond
the resources of our art. Notwithstanding
it appears to have some foundation, for it was
from the critical days in fever that this spec-
-ulation arose. As you perhaps know the
doctrine of critical days holds, that there is
something in the nature of fevers that deter-
-mine them to take on a crisis, & that this
crisis happens at certain times rather than
at others - Hippocrates was the author
of this doctrine, & it has since been con-
-firmed through all ages by the most able
and distinguished men of the medical
profession. The critical days of Hippo-
-crates are the 3^d - 5, 7, 9, 11, 14, 17, and 20, &
according to some the 25th - and 27-35-42

Every practitioner who has already
noticed the progress of Continued Fever,

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has certainly had occasion to remark that⁹³
there is more or less tendency to a remission
on certain days, which however are not so
distinctly marked as those of Hippocrates.
But this may be owing to climate or other
causes. - Although the disease seems naturally
to have this tendency to remission on certain
days, yet experience amply proves that we
derive many advantages by the timely
application of remedies - -

The explanation of these critical days
are as follows -

From the Universality of Tertian
or Quartan periods in Intermittents, we can-
not doubt their being in the animal econ-
omy a tendency to observe such periods. &
the critical days above mentioned are consis-
-tent with this tendency, as all of them ma-
-ke either Tertian or Quartan Periods -

These periods are not promiscuously mixed, but
occupy constantly their different portions in the
progress of the disease, so that from the begin-
-ning to the eleventh day a Tertian takes place
and from the 11th to the 20th a Quartan period
is observed - - What determines the periods
to be changed about the 11th day we cannot
clearly perceive.

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As this disposition to a remission really ⁹⁵
exists in nature we should employ remedies
to obtain this end, and thus I have often
removed continued Billious inflammatory
fevers; the indication is obvious, we must
subdue morbid action to the natural st-
andard, & of all the remedies we possess Bleed-
-ing is the most powerful and effect-
-ual. But in the employment of this rem-
-edy we must be directed by judgement
tempered by discretion. Never prescribe
for the name of a disease, for the very same
disease may be very different in different
persons and in different parts of the
country. This circumstance is strikingly
illustrated in continued fever. In this
City it is very differently treated from that
in the Southern States; Here is an highly
inflammatory fever, calling in for its tre-
-atment a very profuse use of the Lances;
while in Carolina or Georgia, venesection
must be laid aside or very sparingly used.
Let me however observe, that in all cases
wherever they occur, which are accompanied
with a strong full pulse, a hot skin, &
the symptoms indicative of a high de-
-gree of inflammation, we may always

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resort with much safety to the Lanced. 97

Evacuations from the Alimentary canal are highly important in all fevers best especially in those where there is a great quantity of Bile - My practice is always to follow the Lanced with an Emetic, and the best one is Tart. Emet. & Ipecac. combined - The Ipecac. gives promptness of operation to the Emetic, & the Antimony remains a considerable time in the stomach, and thereby completely evacuates it -

R/ Ipecac. ʒj Tart. Emet. - grs ij -

As you may perceive I am much attached to Emetics in all fevers - I have in my own practice found them decidedly superior to purges, but to obtain full efficacy from Emetics it is necessary when the fever is intractable to administer them twice a day,

There is always a fashion in medicine as in other respects - About 40 or 50 years it was the custom to give emetics in all cases of Billious fever, but by an artificial preferment Physicians resorted to the less effectual practice of purging - but Emetics are again reviving.

By consulting the French writers on the subject of Billious Fever we find that they have been altogether driven from

A critical crisis of the

+ Garrisonage

their plan of purging to Emetics; they⁹⁹
declare that by these only, they are able
to overcome Billious Fever of their country
- they - we are told by ~~the~~ writers of other
countries of Europe that Emetics are, now
universally recommended.

They are highly extolled by Jackson, Clarke
and other writers that have published for
these last 3 or 4 years - In this City
they have been long employed, & their eff-
-icacy has been amply tested -

Emetics relieve headache and Mania,
they lessen the heat of the surface, and by a
mild diaphoresis sometimes produce a sol-
-ution of the disease -

I am acquainted with but few cases in
which they are not proper - The exceptions
to their administration are a short neck
and florid countenance or in other words
when there is a predisposition to apoplexy
and Rupture, also advanced stages of Pre-
-gnancy -

Cathartics are next in utility
to these; they also act by evacuating the Bile
and still more the faecal contents of the Ali-
-mentary canal - The best cathartics are com-
-binations of mercury - as Calomel & Jalap or Rhubarb,

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It is worthy of remark that in the administration of purges we should wait for the remission of fever, & if practicable to wait so long, give them at that time, as otherwise they are apt to lie on the stomach, Give a purge during the paroxysm & it will be either immediately rejected or lie quiet on the stomach for many hours -

This purge is to be followed by the saline combinations; they are less stimulating and have more action upon the blood vessels - The mixture which I prescribe is as follows -

R ^x Sulph: Soda	3j
Tar: Stimulans	grj
Succin: Limon	3j
Aqua Font	3iij

The dose is a table spoon full every two or three hours - the advantage of this is that it operates gently and brings on a gentle Diaphoresis -

As this fever advances Enemata are often found usefull especially in irritable habits where Cathartics cannot be given by the mouth, and they are also used to quicken the operation of purges. Incident to all fevers is constipation of the bowels, & in these cases Cathartics may sometimes be repeated

again and again without effect: here it is that Glysters are highly efficacious -

I am next to consider Diaphoretics these you all know are very important remedies in fevers. But perhaps no class of remedies are more hurtful in their administration than these, if the Physician is careless in the use of them - The worst consequences may result from them which has been exemplified in so many instances that Physicians are extremely unwilling to use them, & employ them very sparingly. When you resort to them therefore I hope you will bear in mind the directions I detailed to you in my Therapeutics -

They are either Internals or external and are of various powers suited to various cases; but when a crisis is desired the Antimonials are decidedly the best. Every practitioner is acquainted with their wonderful powers - They were first employed by ~~Summ~~ with great success, & their efficacy was confirmed by Cullen & Meade. Much difference of opinion existed with regard to their preparations - The celebrated James Powder was once highly extolled, & it was thought so good that an imitation of it was made

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called Pulvis Antemonialis. At present ¹⁰⁵
however the Tart. Em. is wholly used & As
a Diaphoretic this is given in the dose of from
 $\frac{1}{4}$ to $\frac{1}{2}$ a grain -

A question has been much agitated whether
its efficacy depends upon the nausea it
occasions - By Cullen it is contended that
it is never useful unless it produces nau-
-sea; but I believe from my own experience
this is not sound theory - We know nausea
is not followed by an abatement of the
febrile symptoms, for the administration
of Squills &c. which occasion great nausea
is not productive of any benefit - It is
I think a law of the animal economy, that
if nausea exists to any extent it will be fol-
-lowed by reaction, which necessarily increases
the fever - Whether this be true or not I
have nevertheless acted upon it for some time
past in my practice - I am careful always
to regulate the dose so as not in the least to
offend the stomach; distinct from this I am
of opinion it will prove mischievous - The
Antemonial preparations act by specific
virtue, they not only occasion Diaphoresis
and nausea, but by a certain impression
which they make upon the stomach and

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whole body, they are emphatically ~~Ante~~⁴⁰¹
= febrile. - Use them in such small doses as
not to occasion the slightest degree of nausea
about the stomach and the progress of the
fever is interrupted. But not so with *Sp.*
= *ca.*; and the other remedies that are only
capable of producing nausea -

The Antimonial preparations are useful
I repeat not only by producing nausea but
by a specific impression which they make
on the system which annihilates the chain
of morbid associations upon which the
disease depends.

But cases will occur where from the iri-
-tability of the stomach the antimonial sea-
-mon be retained: here we must resort to
some of the kindred articles, and of these
the saline mixture is the best. The fol-
-lowing is the formula.

R Succin. Limon or Acetous acid $\mathfrak{z}\text{ij}$

Carbonate Potash — — $\mathfrak{z}\text{s}$

Saturate - and add loaf sugar to make
it agreeable, then dilute the mixture with
 $\mathfrak{z}\text{ij}$ of water - a table spoonful for a
dose every hour or two - - This not only
has great power in subduing arterial ac-
-tion, but it also quiets irritation -

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If you wish to insure its diaphoretic powers add Sp. Nitre Dulcis or Ess. Antemoss.

Besides these there are other diaphoretics as Opium & Ipecac. but these I have rarely found useful in fevers, being better adapted to the Phlegmasia. They seem to have the effect of oppressing the stomach.

In the progress of the treatment of continued fevers I have arrived to the considerations of Diaphoretics - As I told you when these are properly employed they are a most important class of medicine and are productive of very beneficial effects. They determine the blood from the viscera towards the surface and thereby prevent or remove congestion - They alleviate congestions of the extreme vessels & they diminish the quantity of circulating fluids. - Of all the modes of treating fever the sweating plan is the most popular remedy among the vulgar - In every circumstance it is thought the best remedy, nor is this opinion confined to the lower class of mankind, all ranks have adopted the same prejudices on the subject -

Diaphoretics are universally employed but it must be obvious to you that remedies possessing so much power as these, cannot be

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indiscriminately prescribed - Theory
had its influence in carrying the practice of
sweating to an immoderate extent, fever being
supposed to arise from a morbid action in
the system, & sweating an effort of nature
to discharge it - Let me impress it upon
you never to resort to these remedies until
the system is prepared for their reception
by direct depletion; after this you will find
them of signal advantage; but even here you
must select the milder diaphoretics as the
Antimonial preparations &c. - It is univer-
sally laid down as a principle by practi-
tioners never to excite diaphoresis in inflam-
matory fevers by great force, but to induce
it by persuasive measures -

There is a class of Diaphoretics denom-
-inated Refrigerants, which by many are dec-
-idedly preferred to all others in inflammatory
fevers - There are almost ^{all of} the Neutral
Salts, but the Nitre is by far the best, &
is most employed. How these Refrigerant
medicines act we have not ascertained - By
some of the late writers the explanation has
been attempted to be made on Chemical
principles; but however plausible the hy-
-pothesis may appear yet it does not by any

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means afford a satisfactory solution of the problem. However they reduce arterial action and produce a moisture upon the surface & therefore are well adapted to inflammatory fevers.

I have said the Nitre is most used, and it may be given alone, but it is usual to unite it with other articles - Cambric with Calomel & Tart: Emel: it forms the celebrated antimonial powder of Dr Riisb -

℞ Nitrate Potash ----- ʒi
Hyd: Sulf: merc: ----- gr xvj
Tart: Emel: ----- gr j

Misce - Pulv 8, one to be taken every two hours. This rarely excites Diaphoresis, but it reduces arterial action, & is therefore useful. Sometimes it purges, and when this is not desired the Calomel may be either reduced in quantity or excluded altogether -

It even now and then happens that 8 or 9 gr of Tart: Emel: excites nausea, & as no such effect is wanted as I have explained to you the Tart: Emel: must be reduced or excluded and we are to content ourselves with Nitre alone,

Co-operating to the same end, (viz: reducing arterial action), is the application of cold water to the surface - In the next Lecture

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I shall treat of this at some length, and 115
content myself at present by mentioning that
it proves an important remedy - There are
three modes of administering it. 1st By dashing
it over the body - 2nd By Immersion - 3^d By
applying it to the whole body with wet sponges.

The last is the best and least hazardous mode.
Cold water is useful in these modes only when
there is great action of the pulse, and great
heat of the body. Applied in such cases it is
very beneficial. It subdues the activity of the
blood vessels, causing diaphoresis, and quiets
irritability and restlessness of the patient.

But if it is postponed until the system
by and remedies, as by disease, or when there
is a feeble pulse, & all the symptoms of debility
present, it is not only useless but absolutely
perilous: the system is now so low that it is
incapable of reaction and the cold water, much
of necessity increase the exhaustion. Let it never
be forgotten by you that this remedy must
never be employed except when the febrile
symptoms exist in a high degree - At this
period of the disease, the patient is often much
distressed by thirst, and by cramps of the fauces;
here a question arises whether he should
be allowed to drink or not?

The first thing I saw when I stepped out of the
train was a vast, open landscape. The air was
fresh and cool, a welcome change from the
stuffy atmosphere of the city. I walked along
the path, my feet sinking into the soft earth.
The sun was low in the sky, casting a
golden glow over everything. I felt a sense of
peace and tranquility that I had never
experienced before. The world seemed so
different here, so much more real. I
took a deep breath and smiled. This was
my chance to start over, to begin a new
chapter in my life. I would make the most
of it. I would find my place in this world
and live it to the fullest. I would be happy
here, where I could be who I truly was.
The path led me to a small stream, where
I sat for a while, watching the water flow
over the rocks. The sound of the water was
soothing, a reminder of the beauty of nature.
I stood up and walked towards the horizon,
my heart full of hope and dreams. I knew
that this was my chance to shine, to be
the best version of myself. I would not let
this opportunity slip away. I would make
this my home, my place in the world.
I would be happy here, where I could be
who I truly was. The path led me to a
small stream, where I sat for a while, watching
the water flow over the rocks. The sound of
the water was soothing, a reminder of the
beauty of nature. I stood up and walked
towards the horizon, my heart full of hope
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One set of ancient Physicians wholly ex-
cluded from their practice every thing like
drinks. In this they have been imitated by the
moderns in several parts of Europe especially
Spain & Portugal. With another set of an-
cient Physicians it was the practice to deluge
the stomach with water. The truth here
lies in the medium, - the pain of thirst must
certainly aggravate the disease, and it should
be relieved by all means. But judgment
must regulate us for if we allow our patient
to drink as much as he wants the stomach
will be filled & retching and vomiting will
come on & increase the febrile symptoms,
we must therefore allow but a small qu-
antity at a time, as a table spoon full or
two & the drink should be extremely mild
and not the least stimulating. Lemonade
Apple-water, Toast and water &c.
These drinks at this period of the disease will
also constitute the proper nourishment of the pa-
tient. Every part of our treatment should
correspond, we must not pull with one hand
against the other, our object is to reduce action
let us therefore either give no food at all
or let it be of the mildest nature. The
above will be amply sufficient to support

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the patients strength - After these remedies already mentioned, many have much confidence in Mercury urged to a moderate Salivation - There is no doubt that when patients have been subjected to the use of mercury the progress of the fever has been arrested; but such is the rapidity of the disease that it terminates generally before the mercury has began to make its impression.

It is also difficult to produce a salivation during an active pulse - It should not precede the other depleting remedies. Before the mercury can operate arterial action must be reduced, and when this is effected the patient is so much relieved that it is unnecessary -

Nevertheless there are cases of Billious fever wherein it is necessary to appeal to mercury: when they resist all other treatment and remain for several weeks stationary, it is fair to infer the existence of visceral obstruction, and these are only to be cured by locking the mouth with Mercury; nor does meet with difficulty or uncertainty here, for in a day or two after the administration of the medicine we shall generally find the mouth a little affected -

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Much has been said on the subject of 121
Blisters in this disease, at present even the
question as to their utility is much doubted
and far from being settled. By several
modern Physicians of great celebrity it is con-
-tended that they are highly mischievous;
of these the most conspicuous is George Fordyce,
who is universally allowed to be the highest
authority. On the subject of fever he says
that they are not seen to have any tendency
to interrupt the progress of the Fever, but on
the contrary really aggravate it by their stim-
-ulating nature. The difference of opinion
among Physicians on this subject arises from
the injudicious manner of using the rem-
-edy, by which they are not turned to the con-
-dition or stages of the fever. Applied at dif-
-ferent periods of the disease their effects will
materially differ: when however they are app-
-lied judiciously they are among the most cer-
-tain and efficacious of our remedies -

Many Practitioners are in favour of their
use, but remember never to employ them
until you have premised Bleedings, Em-
-etics & purges - Then it is you will find
Blisters of service, they quiet the pulse and
equalize exertments and more frequently

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interrupt the irregular action of disease 123
and establish the regular order of health -
But by hastily resorting to them you will
not fail to aggravate the febrile symptoms.
As Solomon the wisest of mortals said, there
is a time for all things, and it is most
strikingly illustrated in the administration
of this remedy -

It is necessary for me to say a few
words on the management of patients during
convalescence - After an attack of fever
there is generally left behind an accumulation
of excitement - When this is the case the
patient should either be removed into another
room, or every thing removed from the room
in which he has been confined during his
illness, such as Pill boxes, vials &c. - And in par-
-ticular his clothes should be changed -

All these by being constantly before him keep
up an association of ideas relative to the se-
-enes past, & have a great tendency to prolong
the convalescence - You will often find pa-
-tients very solicitous about their diet and
exercise - You must be very cautious of allowing
them too soon to recur to their former habits
As respects diet you may suffer them to
take Sago, Barley, toast & water, panada

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gruel &c, not allowing them to take animal food too early or you will be sure to prolong his restoration to health if not bring on a relapse.

As to his exercise you may after a short time in pleasant weather suffer him to ride a little distance in a carriage, enjoining upon him and his attendants not to prolong the journey untill it becomes fatiguing nor his stay till after night.

From various causes this disease during convalescence is apt to degenerate into a Chronic form termed

Felicitula or Inward Fever

Its symptoms are a small chorded pulse, hot skin, redness of the face, pain in the head and side, great thirst, scanty high coloured urine, likewise tension of the abdomen and oedematous swellings of the limbs - sometimes costiveness or Diarrhoea comes on - In the first of these we must never resort to the more powerful purgatives for they will always leave the bowels in a still more constipated state & most generally an aggravation of all the symptoms - Rhubarb is here the best remedy, it purges gently and leaves the bowels in a healthy and natural state.

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Handwritten notes in the right margin, possibly from the adjacent page. The text is also mostly illegible.

In cases of Diarrhoea the Chalk Julap ¹²⁷
will generally be found sufficient - It
frequently assumes a Remittent or Inter-
mittent type, and is sometimes accom-
panied by congestion of some of the viscera
particularly the Liver and Spleen -

To cure this disease (from the violence
of the pain & febrile action) we are sometimes
obliged to have recourse to the lance -

A gentle Salivation, or what I have sub-
stituted frequently, Nitric Acid in the dose
of a drachm a day, persisted in for eight
or ten days will be found highly useful

Blisters are likewise here very useful
applied to the side, or if you wish to
institute the disease off by a sort of drain, to
the ankles & wrists -

The Bark and other Tonics are never
to be used until we have entirely subdued
the febrile exaction -

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Typhus Fever

The name of this disease is derived from the Greek word "Typhos" which signifies Stupor, an affection which is generally an attendant on this disease.

By Nosological writers it is divided into two kinds - Mitior and Gravior but as the one is only an aggravated form of the other I shall make no distinction between them. As Typhus is so well described in Boates I shall not upon this occasion occupy your time or attention with any history of it. It is not a usual form of fever in this country, being almost exclusively confined to Military Hospitals & jails of the Eastern Countries, and arises from poverty, ~~vice~~ and wretchedness; which happily is not an extensive source of disease in the United States. A few cases however have occurred in this city, but so few that my experience has been very much limited.

What I shall give you on this subject will be principally from my own observations in European Hospitals.

There exists much diversity of opinion as to the cause of this disease - by some it

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is said to arise from contagion, & under 131
certain circumstances there is no doubt it does,
as in crowded and filthy places which are
seldom or never ventilated - Under such
circumstances the experiments of Haygarth
show it to be an extremely contagious disease,
not being exceeded by the small pox, which
we all allow to be the most contagious of
diseases - But admitting the statement
of Haygarth in its fullest extent it does
not prove that Typhus is contagious under
all circumstances, for it is never the case where
free ventilation exists - You may remem-
ber that I told you in one of my Lectures
on Pathology that fevers were seldom or
never contagious, even in Public insti-
-tutions, or even in Tropical climates, dur-
-ing the summer months - The reasons
of this is obvious - in warm weather the
doors and windows of all the apartments are
thrown open, and the air freely admitted,
the contagion if it does exist is not allowed
to be concentrated sufficiently to pro-
-duce disease -

Typhus seems to arise from several causes,
a very common one is Marsh miasmata, and
it has often arisen from fasting, copious

This disease attributed sometimes to eating mouldy
grain - legged eye &c.

disease acutely attacks the patient in summer
when the doors and windows are open and the
air passing through, but in winter the doors
and window shut. It never happens in
tropical climate - A ship attacked with
this disease the moment she reaches the
high latitudes is immediately disaffrased

evacuations, solitude, anxiety, intense 133
study, or any thing occasioning great depression
of mind or body.

Treatment of Typhus Fever

Deceived by some appearances in the first
stage of this fever, it was once the universal
practice at the commencement of the disease
to bleed. This was the practice of the ancients
but by no means confined to them. Consult-
ing the most celebrated writers from Sydenham
to Huxham we find that the whole current
of testimony was in favour of blood letting.

But it is hardly necessary to mention to
you, that a more enlarged & rectified experi-
-ence has ascertained that although hemes-
-ection seems to be imperiously demanded
yet it is highly pernicious. No one would
now think of using the Lance where the
disease assumes its ordinary appearance.

As the practice is new, we begin with
Emetics, & there is no choice as to the kind
Spessac; or Tart. Antimon: answers equally
well. When timely administered they
have in many instances entirely arrested the
progress of the disease.

Whatever be its cause it is created in the
Stomach and by an evacuation or change of

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action in this organ, the fever is frequ- 135-
-ently subdued: but when Emetics do not
accomplish as much as this, they always
alleviate the violence of the disease & prepare the
system for more powerful articles -
At one time it was a common practice to
follow the Emetic with Antimonial prep-
-erations so as to induce nausea - This is
lauded even by Cullen and followed by all the
disciples of the Edinburgh school, But what-
-ever the ~~effects~~ ^{advantages} of this practice was it
has at present given way to another - Of
late it has been a fashionable plan after Em-
-etics to resort to Cathartics. So Dr Hamilton
we are indebted for this, if it be an impr-
-ovement - After being frequently disappointed
by Emetics he employed purgatives and the
result was so satisfactory that he abandoned
Emetics altogether - And in this he has been
much imitated by English practitioners. But
he observes, to render cathartics effectual
they must be long continued & of the most
active kind - The one he prefers is Calomel
either alone or combined with Jalap or Rhubarb
which he says must be repeated until all
the offensive matter of the Alimentary ca-
-nal is completely evacuated -

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Of the utility of purging there is no doubt 137
The testimony of the British Physicians is in
its favour, and I have seen it employed with
most decided advantage.

There is always in this fever an accumula-
tion of offensive matter in the bowels, par-
ticularly in the lower part of them; this is
known by the incrustate tongue, the foul
state of the faeces, and by the dark alvine
evacuations, and until the nature of these
evacuations are changed we must continue
to pour in our Cathartics.

Debility which might be anticipated from
this practice, does not take place, on the con-
trary the patient is invigorated in propor-
tion as this foul matter is removed from
the intestines: for upon this it is that the
weakness depends.

As co-operating with these, cold applica-
tions have been much used. This very an-
cient practice was followed by Celsus and
many writers of his age; but amidst the fluctu-
ation of opinion and changes of practice it was
in Typhus was for a time overlooked.

About a Century ago it was revived and
the writer who at that time gives an account
of it, was so well pleased with its efficacy

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that he denominates it the Febrifugia 139
Magna - About 20 or 30 years ago the direct
application of cold water was made by Currie
of the West Indies, who published on the
subject. His practice has not been fully
confirmed though since the publication
of his book it has been considerably followed.
As regards the United States I think this mode
has been very little used.

In this city all sponge the body & apply
cold to the head as in Phrenitis. But this is
not owing so much to a want of confidence
in the remedy as to our attachment to vene-
-section - As regards our autumnal fevers
in my opinion there is nothing so good as
the effusion of cold water. It must be ob-
-vious to you that it is only in the first
stage of Typhus & when there is great heat
that this practice is suitable - Indeed it
has been laid down by Cullen that it is app-
-licable only when the exacerbation is at
its highest pitch, when there is great thirst
flushed countenance, restlessness and anxiety.
But if we are inclined to try it in the ad-
-vanced stage, which is sometimes done, he
recommends opium, brandy and other ef-
-fusive stimuli before the application of

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colde, to induce ex great actions on the 141
system - It must never be used where there
is chillness, paleness or perspiration -

As to the *Moeus Operandi* of this remedy
Dr Jackson entertains different views from
the generality of practitioners - He does not
think that cold water acts merely by abstract-
ing heat from the body, but says^d that a
Tonic impression is produced by this remedy.
but in order to do this susceptibility ought
to be previously awakened by the warm
bath, friction & diffusible stimuli - This
susceptibility being aroused, then totally dis-
regarding the former we are boldly to apply
our remedy^d

As a Tonic then the cold water is to be ap-
plied at any time of the disease - Whether this
view of the subject be correct I shall not say,
but the management here would require so
much skill and nicety that I cannot recom-
mend it to you - The theory is very plausible
and the practice might be very successful
but we should not adopt it until it comes
to us recommended by a greater weight of
authority -

The modes of applying cold water are
several - By dashing it upon the body at

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the temperature of 40 or 50° of Fahrenheit -
by shower bath, and by Sponges - Curries
practice has been large and he prefers the first
mode repeated three or four times a day -

Extraordinary as it may appear I witnessed
the most remarkable advantage from this
mode of applying it in the city of Edinburgh.
During my residence there 1200 men were
brought from on board a ship to the Hospi-
tal, all of whom were affected with the Typhus
Dr Gregory directed buckets of cold water to
be thrown on them, and in some instances
the effect was truly astonishing - The hot
skin and pain in the head instantaneously
vanished, as if the patient had been touched
by a magical wand. But in others where
there was but a partial reaction or none
at all the consequences were in general fatal.
The effects of the shower bath were the same.

From the whole which I witnessed I con-
-cluded that all the remedies were in gen-
-eral good - Yet it produced such fatal eff-
-ects upon some that upon the whole it should
be avoided as eminently perilous

As a safer mode I recommend Spo-
-nging - and here the reaction should be
of the lowest kind, & the temperature

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about 30 or 40° - It removes the heat 145
quits restlessness, and all the effects that
result from cold water may be had from
this mode of applying it - By Currie
none of the faults which I have expressed
respecting the effusion of cold water exists
but it is my duty to tell the result of
my own observations which were very
extensive at Edinburgh -

When the progress of the disease
is not arrested by the remedies already men-
-tioned, it is now the universal practice
to resort to Diaphoretics. At one time
indeed no remedy was so confidently relied
on in this disease as an early and powerfull
sweating - During the reign of the
humeral Pathology a system of notions pre-
-vailed which originated in obscurity or the
eclipse of medical science. They held that
all contagious diseases, & typhus among the
rest, depended upon a morbid matter
floating in the system, and that they
were to be cured by the expulsion of it -

Conducting upon this hypothesis, sweat-
-ing was employed in the earliest stages of
the disease, & vigorously prosecuted
This is one of the many instances in

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medical science when a false theory/ 147
has dictated a pernicious practice.

Nevertheless there is a point in this disease
when sweating is attended with advantage.
This point is in that condition of the body
following the use of other depleting remedies
as Emetics, purges & also the application
of colds, But there is nothing peculiar in
the use of Diaphoretics in this case: they act
upon the general principles which I have
already drawn in my Therapeutics, & all
we have to do is to attend to the condition
of the system, prescribing the mild or the
stimulating diaphoretics according to cir-
cumstances - It is usual in this stage of Ty-
phus to prefer the milder ones, and the
Saline mixture which I have mentioned
answers exceedingly well - It would seem
that the Antimonials were peculiarly suited
to this case, but they are condemned by so
many physicians of great intelligence, that
we are forced to doubt of their utility -
Why they should not be beneficial in
Typhus as well as in other fevers is im-
possible for me to say - Though in
theory there may be no obvious reason
why certain medicine should be preferred

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to others, yet when the distinction is settled by a great weight of authority it is in general our duty to abide by the decision. By consulting all the modern writers you will find it laid down that the antimonial diaphoretics are hurtful. They increase the prostration that already exists and they seem not to create any tendency towards a critical solution.

My experience on this subject is so very limited that I can do no more than offer you my reasonings. You must therefore read & read, and then judge for yourselves.

Upon the whole whilst we are exhibiting antimonial diaphoretics internally we must promote their operation by some of the external modes of exciting sweat.

At this stage of the disease if it is not arrested by all the above remedies, there takes place an abatement of excitement with considerable debility, and here we are to change our practice.

Under these circumstances there is nothing so valuable as the *Robt alkali*.

It must be given in small doses to keep up excitement & support the strength of the system. There are several modes

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of exhibiting it; but the most eligible ¹⁵¹
one is in the form of the Botatite Zulus -
which is made as follows -

Rx Carb: Ammon: ——— ʒj
Gum Arab ——— ʒij
Sack: Alk: ——— ʒj
Aqua Font: ——— ʒivj

Half an ounce of this mixture may be
taken as a time - we may accompany this
with wine whey to promote its diaphoretic
powers -

There seems to be an affinity be-
-tween some medicine by which their eff-
-icacy is greatly increased when in combina-
-tion - This is most strikingly illustr-
-ated in Rob: Alkali & wine whey - This
latter is prepared by taking 2 Gills of milk
and 1 Gill of wine - boil the milk & then
add the wine - when cool take care to sep-
-arate the curd from the whey most comp-
-letely as it would prove difficult of dig-
-estion - Sweeten to make it agreeable - If
it should be too strong we may dilute it by
adding warm water -

As the effect of Rob: Alkali are extremely
evanescent it is proper to give it in small
doses repeated every hour or half hour

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Under the circumstances that we
resort to Pot: Alkali, Camphor is worthy
of attention, and is deservedly of high repu-
-tation, being by many preferred to the former.

I shall not institute a comparison between
these two articles, but if I should make any
distinction it would be in favour of the
Pot: Alkali. - In protracted cases
the remedies should be alternated so that
when the system has become habituated
to the impression of one the other may be
given. - In this way you all know the most
unequivocal advantages are obtained in the
practice of medicine. - There are many
ways of exhibiting Camphor. - It is often given
in bolus, but in this way it is difficult to take
and produces nausea. - The best mode is the
Camphor: Pulv. - R Gum Camphor - ʒj
" Myrrh - ʒss
Sacch: alb: - ʒij
Aqua Font: - ʒivj

The neatest way of preparing the Camphor
is a milk solution of it -

Precisely at this juncture I have known
Blisters to be of the most signal advantage
They are condemned by many of the most

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respectable authorities as Lordyce - 155
Pringle &c, but we are however sanctioned
in the use of them by a large mass of coun-
ter-authority - They are highly spoken
off by Cullen & still more by Linck, who is
so conversant in fever: besides we have a large
number of lesser authority - indeed it would
seem that if there is any point made out
in physic it is the efficacy of blisters in
this case - By some it is contended that
sinapisms are quite sufficient to sustain the
excitement of the system - but this is wrong:
the use of blisters is objected too in a delirious
= tea condition, as increasing the prostration
of the system by the evacuation which they
produce - In my practice I have never
known them productive of any such effect
and whatever difficulty arises upon the point
all allow that blisters are highly efficacious
in relieving delirium. Applied to the head
in the delirium of Typhus, they are decidedly
the best remedies that we are acquainted
with - To obtain their full effect they
should be large enough to cover the whole
head and should remain upon it 24 hours

But some condemn them even in this
case: Dr Darwin tells us in his Zoonomia

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that instead of being serviceable he has 157
very generally found them productive of injury
I find that Thomas who is in all your hands
is likewise of this opinion - But there are
insulted authorities & you must not listen
to them - Excepting two all writers concur
in the advantage of Blisters in Delirium.
As regards this City I know of none who
are of a contrary opinion whatever be their
theories on the subject -

The next I shall consider is Opium - There
is not a point in medicine more controverted
than the one respecting the use of Opium in
this disease - It is well known to you that
Brown placed it at the head of his Stimulants
and thought it the best remedy in all low
diseases: this view of its qualities was acted
upon by all his disciples, whose examples had
a wide influence upon the practice of Physicians

It was at one time the prevailing fashion
to treat Typhus with Opium & wine - This
was the general practice until Sir George
Fordyce promulgated his doubts as to its
propriety -

He says that the result of his experience
is, that however the remedy is employed
whether as to the dose or stage of the disease

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it is not only useless, but in a majority 159
of cases proves mischievous.

The influence of his great name has tended
to impair the reputation of Opium in Typhus
but I think when judiciously employed
it is eminently ~~calculated~~ to meet some of
the indications - In using it we must al-
ways remember that its effects may be greatly
modified by the dose in which it is given. It
may be so managed, as to produce diametr-
ically opposite effects - In very large doses
the system sinks under it at once & no
excitement is developed; but in small do-
ses repeated at intervals we obtain from it
all the effects of an unequivocal Stimulant
And if I mistake not I mentioned to you on
another occasion that in Turkey & in other
countries where religion forbids the use of
wine, it is customary to employ opium with
the same view that we do Stimulating Sign-
-ors - It follows from what I have said
that Opium may be given in small doses
repeated at short intervals in the Low states
of Typhus Fever &

It is usual to give about ʒj every 2 hours
or "pro re nata" But it is alleged, with a view
to excitement, Wine is a much better remedy.

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As a general rule I admit that wine 161
is preferable because it is grateful to the stom-
-ach and in most cases is sufficiently pow-
-erful. It possesses the advantage of being
nutritious and more permanent in its ef-
-fect than Opium. There is a choice in the
kind of wine that we should employ. Madeira
or Sherry if they can be procured good, should always
be preferred. Of late Claret & Port and the
milder French wines have been used: though
they may be more grateful to some, they are
in general less serviceable, and are not so no-
-urishing as the former; being much less stim-
-ulating we are obliged to load the stomach
with them, & a rejection of the whole is some-
-times the consequence. It is important to
bear in mind that at the advanced stage
of the disease it is characterized by a want
of susceptibility: and since in the use of
stimulants much larger quantities than or-
-dinarily are required, the quantity of wine may
be as much as a quart in 24 hours - in some
cases 2 or 3 bottles have been taken in a day.

Although I allow wine to be highly ef-
-ficacious as a remedy, yet there are many
cases in which Opium has been found
superior.

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In Typhus there are certain symptoms 163
and conditions of the system in which Opium
is indispensable. The first symptom which
I shall mention is Delirium. This may arise
from opposite states of the Brain. If it occur at
the commencement of the disease we may con-
clude that it is from an inflammation of
this organ. But if it take place at a more
advanced stage, where there is evident sympto-
ms of debility, we may infer that this is the
cause, and here it is that Opium stands unris-
-allied. With Delirium are often associated
restlessness, mental anxiety & morbid vigilance
and here again Opium is unparagoned.

At a still more advanced period, or at the
close of the disease, a diarrhoea sometimes ac-
-curs which increases greatly the debility that
already exists, and Opium is not to be dispensed
with here. It may be given by itself in suf-
-ficient quantities to restrain the diarrhoea
or in form of the Chalk Julep which is pre-
-ferable.

These are some of the remedies suited for the
second stage of Typhus Fever. This stage for
the most part is treated with diffusible stim-
-ulants for the purpose of keeping up the
excitement of the system. As a remedy

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in this stage the Peruvian Bark has
been much employed, but at present it has
lost much of its reputation - The evidence
of practitioners on this subject are extremely
contradictory; whilst by some, great confidence
is placed in it, by others it has been condemned
as absolutely useless - This difference of opinion
proceeds from the different circumstances of the
disease in which it has been prescribed - From
my own experience I believe there are cases
in which the cinchona may be used with the
most unequivocal advantages - It would seem
it is applicable neither in early nor in very ad-
vanced stages of Typhus - But if the vigilant
practitioner will cautiously watch the progress
of the disease he will discover about the middle
of the course that there is more or less tendency
to a crisis as has before been observed what-
ever be the remote cause of the fever - In the
United States where Typhus has been known
to arise from Marsh miasmata it has clearly
been noticed - At this critical period it is
that we are to resort to the Bark - as yet I have
hardly ever seen a case in which the medicine
could be taken in substance, owing to the
irritability of the stomach which is connected
with the disease; we must therefore

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exhibit it in some of the more agreeable 167
forms that have already been mentioned.

Where it will not agree with the stomach in
any shape whatever, we must substitute in
its place the Bitter or Aromatic Tonics, and
of all these the Serpentaria is the best.

They are all grateful & stimulating and are
on every account well suited to this disease.

Carbonic Acid - This in the form of Yeast
was at one time much confided in, & practition-
-ers were led to the use of it from viewing
Typhus as a disease depending upon putridity
which might be corrected by the antiseptic
power of the medicine; But now we know
that putrefaction never takes place in the
living body. Thus petechia, eruptions &c
which have been looked upon as symptoms
of putrefaction, are found associated with a
state calculated to resist it. The experiments
of Monroe in dissection prove that those sub-
jects who have this appearance remain much
longer without putrefying than any others.
I say nothing of the many experiments that
have been made to prove that putrefaction
cannot occur in the body while alive.

But as incorrect as the theory was which
led to the use of Carbonic Acid, the practice

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appears to be a good one - This Acid 169
is certainly a grateful medicine, relieving
nausea & imparting tone to the whole system.
It may be exhibited in a more agreeable form
than that of yeast - in Seltzer water - And the
effervescent draught has often been given with
advantage -

But in the Low states of Typhus there is no
better way of giving it than in Mal' Liquors
as Porter & Ale - they often produce very
important effects in this disease - I know
of nothing more grateful to the Stomach
than London Porter - it is not only stimu-
-lating but Tonic also, producing on the
system permanent impressions - On this
account it is more beneficial than wine
or Ardent Spirits in many cases of Typhus
when the effects are of an evanescent char-
-acter. Should you be inclined to give
the carbonic acid in form of yeast, the
Dose is a table spoon full every two hours.

Entertaining similar views of the pow-
-ers of the mineral acids in preventing
putrefaction. Physicians introduced them
in Low Fevers about half a Century ago
but to Mr. Fordyce we owe their esta-
-blishment as a medicine in this disease.

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He first used them in Cynanche Male 1711-19na, accompanied with a low debilitated constitution of the system, & was so much pleased with their effects that he was induced to extend their use to all low diseases -

His practice is to employ the mineral acids after evacuations by Emetics & Purges -

The reports respecting these remedies are in favour of their efficacy. Distinct from the above authorities we have that of a great mass of London Practitioners, but as much as they are employed in England they are still more so on the Continent of Europe, and during the war in Germany they were most successfully used in the Typhus that so frequently raged among the soldiers.

Dr Burych Professor in the University of Strasburg in France was so successful in them that his sovereign rewarded him with a pension of 50.000 crowns -

Nevertheless it is my opinion that the virtues of these acids have been greatly overrated. During my residence in Europe I had ample opportunity of witnessing their effects: It is true they were always grateful & sometimes highly beneficial but I am certain when compared with

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some other remedies their power will appear feeble, and I have seen cases treated with them in which other remedies would have proved more successful ~

The accounts we have of them do not carry the features of truth, they are too heavily laden with the exaggerations of impostures and empirics - The only indication which they are calculated to meet is stallay thirst and relieve the dryness of the mouth and fauces - They may however by their tonic powers keep up the excitement in some cases to a certain extent, though under no circumstances should they be trusted to the exclusion of other remedies that have been mentioned ~

Of these acids, the muriatic has generally been preferred to the others - It is given in the dose of 12 or 15 drops in an infusion of Columbo or Bark every 2 hours and gradually increased ~

I have now mentioned to you the most powerful & approved remedies in the first and second stages of Typhus Fever; But it often happens from improper management or from the uncommon violence of the disease, that the

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System begins to sink with great 175-
rapidity and death appears inevitable
we must then adopt a new plan, nor
under any circumstances ever despair
It is our duty to renew our exertions, & to
invoke all the resources of our art.

Such cases as these are the best calculated to
stimulate the physician to the most unre-
mitting perseverance, for he knows that some-
times when there is no hope whatever, by a
judicious application of remedies the face
of things is suddenly changed.

At this juncture the treatment consists partly
in the augmentation of the doses of all or some
of the preceding remedies: The *Poti Alkali*
especially must be given in much larger
doses, and ardent spirits must be copiously
drank. - The *Carbi Ammon.* must be given
in the dose of 10 grs. every half hour, and
wine should be taken in as great quantities
as the stomach will bear.

Of late it has been the fashion to employ
the *Cayenna pepper*. It is only a few years
since it was first introduced. - The practi-
tioners of the West Indies first used it in
Cynanche Maligna, and were so much pleas-
ed with it in this disease that they

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extended it to Typhus, in which it has 177
very generally been employed. - If we credit
their accounts respecting it, it must be truly
an important article. It is given in the dose
of 4 or 5 grs every two or 3 hours

I knew not whether much benefit is to
be derived from Blisters at this period of the
disease. - They rarely draw & when they do they
sometimes occasion mortification. - Three or
four table spoon fuls of Brandy with Cayen-
ne pepper rubbed over the whole surface
of the body produces a glow and is productive
of much excitement. - I have often found
by the use of these that the pulse which was
scarcely perceptible was distinctly felt in a
few minutes. - At this time a decoction
of cantharides & Spirits of Turpentine is very
important. \mathcal{R} Bail. \mathfrak{zj} of Pulv Cantharides in
4 or 5 \mathfrak{z} of Spirits of Turpentine - used as a
friction. - this application very seldom prod-
uces vesication. -

At this period the Anti-spasmodics
have been used such as Mustk, Castor
Gum Fœtida &c. - The first of these is the
most powerfull - it is given either in bolus
or Julep - the latter is preferable. - In all
Dispensatories you will meet with formulas

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of this article, but to you I would reco- 179
mmend the following -

~~Rx~~ Maschus —
Gum Arab. Jaa — ʒij
Sacch Alb: — ʒj
Aqua Fons: — ʒvi

Of this the dose is a table spoon full every
hour -

Of the Castor I know but little - - The
Asafetida I have sometimes used with ad-
vantage - There are several modes of adminis-
tering this, viz. In Pills, Tincture, & watery
solution, the last of which is the best.

~~Rx~~ Gum Fœtida — ʒij
Hot water — ʒvi

Dose a table spoon full -

The immediate effect of this medicine is
to quiet nervous irritation and render the
condition of the patient more comfortable,
as a general rule they are not as I know
of preferable to Opium, but there may be
cases to which they are particularly adapted.

In this low state of the disease there is
often such a loss of susceptibility of the
stomach from its being habituated to med-
icine, that the most powerful article will
not produce the slightest impression.

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In this case we must seek out some other part, or some susceptible surface upon which we may apply our remedies, and none appears so well adapted as the rectum.

It has been said with truth that the Anteriorities are the *Ultimum moriens*. It is undoubtedly true that when the stomach is dead to all impressions, a powerful one may be made upon the rectum. All our remedies may be applied to this part of the system. If wine it may be administered with advantage by the rectum, and opium, especially when the stomach has lost its susceptibility to impressions produces the best effects in the form of Enema.

At this advanced stage of the disease Mercury has been employed by some. I have already told you that it was used at the commencement of the disease to evacuate the alimentary canal of the dark acrid offensive matter upon which the prostration of the body depended. It is here likewise advised if there is no febrile action, although there is coma & Low delirium, the tongue & fauces loaded with offensive matter & every appearance of approaching dissolution. Yet even at this period Mercury is resorted too with

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advantage - It is to be given in minute
doses every 2 or 3 hours & the mercurial oin-
tment is to be plentifully rubbed upon the
thighs. The immediate advantages of this me-
dicine is to relieve the bowels of an accumu-
lation of feculent matter. But this is not the
only ~~thing~~ with which it is presented, it
acts here by creating a mercurial fever which
changes the face of things & often produces ac-
tion approximating to that of health -

Whilst we are administering mercury we
must not omit our other remedies: the
vine, Opium, Rob: Alkali &c, must be continued
and perhaps calomel combined with these
remedies is more beneficial than when given
alone -

The mercurial treatment of Typhus is
not altogether a new one - It was introduced
about 8 or 10 years ago & the evidence we have
in its favour is such as to justify us in
having recourse to it in these desperate
cases - I have witnessed the most unques-
tionable advantages from its use -

I have now detailed to you the treatment
of Typhus fever. But little will this avail
if in the treatment of this disease the prac-
titioner is not influenced by other considerations,

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In this fever ventilation of the apartment 185
of the patient is of the highest importance
and is productive of the best effects - It has
been observed in the West Indies that merely
removing the patient under Typhus from
his own to another room, has sometimes
had the effect of changing his disease into a
simple remittent - In some cases this is
not practicable & then we have recourse to
other means. These are cleanliness of the bed-
clothes & of the body linen, which should
be at least daily changed - The excrements
should be removed as soon as they are evac-
uated, the floor should be kept clean and
sprinkled every hour or two with vinegar &
water, or what is better ardent spirits -
Company must be entirely excluded; this
is important in all fevers, but more par-
ticularly in the one now under considera-
tion - Company operates mischievously
by vitiating the air & distracting the mind
of the patient, producing delirium to which
he is already disposed -

This is the management of Typhus fever
but in this disease the symptoms are so
variable that it is impossible to lay down
directions with precision -

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In warm climates Typhus generally terminates in about 10 or 12 days, but in milder climates it is protracted to 3, 5 or 6 weeks - During a Typhus of this long standing we are called upon to prosecute our treatment without intermission, you must carefully watch the varying state of the system and apply your remedies accordingly - It is impossible to tell you precisely how to manage this disease in a Lecture, as it would be to give directions to a mariner about to embark, how to manage his vessel on the ocean where it will be blown about by every changing wind - In both cases all that can be done is to lay down some general instructions, afterwards much must depend upon the judgment and discrimination of the person to whom they are intrusted -

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Winter Epidemic

Typhus of the United States.

As I have already informed you, the Typhus Attitor and Gravior as described by authors is by no means an ordinary disease in this country. They depend upon causes which in our happy lands seldom exist to any extent. But in place of this a wide spreading pestilence of the same general character has desolated some of the fairest parts of our country.

In its history I shall only mention that in the year 1806 the attention of Practitioners was arrested in the state of New Hampshire by one Sporadic case of a distinct malady which they found extremely difficult of management. After lingering for some time in that part of the country it began to spread, & in a few years became prevalent in all the New-Eng-land states. Then it extended itself to New-York & Canada and afterwards visiting this state passing on to Ohio, Kentucky and the North west part of Virginia, since when it has spread over all that State —

In this city it first occurred at the 191
close of the winter of 1813. We were not warned
of its approach by any of the premonitory signs
of Epidemics. There was nothing unusual
in the season nor much sickness in the
City. We heard of the presence of a mor-
tate fever on the opposite shore (New Jersey)
but we were in the perfect enjoyment of
health, and unaware by the storm that was
about to burst over our heads.

The season being far advanced when it visited
us, it did not continue long enough to occasion
much mortality; but the succeeding winter
its victims were much more numerous.

It is not expected that I am able to exhibit
to you a complete view of this disease, which
must be modified by all those causes which
we know to exercise a material influence over
all epidemics. The information I shall give
you on this subject is derived from my own
observation, & from communications on which
I can implicitly rely - All accounts agree
that it is a disease of assuming every variety
of forms & requiring a diversity of treatment.

It commences with a sudden prostration
of strength, connected with alternate rigors
& heats. The skin soon becomes dry & flid

or pimpled as if it had been exposed 193
to cold; Sometimes the face is livid, and
sometimes bronzed. The Ala of the nose is con-
tracted, the forehead smooth & polished, the
eyes wild & glassy & the whole countenance
expressive of great anxiety & distress. The
pulse is at first slow & apparently depressed
but soon becomes quick, feeble & vibrating
like the chords of a musical instrument, &
lastly sinks so low as not to be perceptible.
Now & then affections of the head come on, &
various hallucinations or complete delirium
terminating in stupor or lethargy. Some-
times the disease assumes a more violent
character than this, & if we may credit some
authorities on this subject it has seized in-
dividuals in the midst of their occupations
and cloven them down like a stroke of light-
ning.

The slightest forms commence their
attacks with pains in the stomach, sides, back,
head, and toes resembling the sting of a bee
or the stroke of a hammer. They are at
first fugitive, but soon become fixed in
the head, affecting the power of vision, &
producing delirium. But these are rare
occurrences. The disease commonly commences

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with a sudden & powerful attack, 195
fugitive pains over the body first appear
but soon become fixed in the head, and
languor of mind & body, with prostration of strength immediately follow. These soon succeed each other, and are attended with a dry skin, feeble pulse, & parched tongue. To the pains in the head other affections are added, such as, throbbing of the temples, vertigo, stricture across the forehead, morbid vigilance, & delirium of every degree, from the utterance of incoherent ideas to the most violent Rhapsodies. If the patient remains in his senses his mind is extremely affected; he is solicitous for the safety of his life, he sighs & complains constantly, & his imagination presents to him the most disagreeable images. In this situation he is indeed a most restless, wretched, & unhappy object. But in some cases there is no local termination to the head or other parts. A prostration of muscular power occurs & the patient complains of listlessness, provided there is no chill nor fever, but the pulse beats 140 or 150 strokes in a minute. This is a most insidious form, being destitute of positive symptoms it is calculated to deceive the physician.

Directly the reverse of this is another 197
form ushered in with Pneumonic congestion
or inflammation. It is commonly attended
with fever, pain in the side & chest, panting
and laboured respiration. Here the determi-
-nation to the lungs is evident, both by the
above symptoms & by a cough & bloody ex-
-pectorations. In many parts & especially to the
Southward, there is great gastric distress and
vomiting of bile. The pulse is full, volum-
-inous & strong, but soft & readily compressible
possessing no characteristic of inflammation.
Many of these cases resemble the ordinary
Bilious Pleurisy, & a practitioner unacquaint-
-ed with the Epidemic would treat them
as an inflammatory disease, with the Lances
and purges. This state does not last long,
in a few days, or a few hours the disease
becomes as well marked & unequivocal Typhus.

Muscular strength now rapidly declines and
the Pneumonic affections become aggravated,
the mind becomes distracted, or the patient
sinks down into stertorous slumber. The
tongue and fauces are covered with an in-
-crustation of a dark brown colour, and are dry
and hard to the touch, the countenance is
haggard, the skin is hot and parched

and in the late stages dry and cold, 199
completely insensible to cold or stimuli, &
covered with petechia. The latter however
does not occur in one of an hundred cases.
There are some cases in which the chief
seat of inflammation appears to be in the
throat; these cases occur most commonly
in the South. The throat was observed to be
affected with inflammation, & a little time
after physicians were surprised to see a
rapid sinking of the strength, laborious
respiration &c. This inflammation is ma-
terially different from the Anginose affec-
-ions, for there are enlarged tonsils, and the
swelling of the fauces is of a mahogany colour
& different from healthy inflammation.

What then is this disease? To this question
I am unable to give a definite answer.

According to Nosologists it is not a fever, for
it is evident that in some cases it is altoget-
her unaccompanied with febrile affections.
In some instances we have seen it unat-
tended with chill, heat or acceleration of the
pulse, or any of the functions.

But cases of this kind are extremely rare.
In general there is extensive inflammation
in the great cavities of the body, though

externally it is often slight & of an 201
Erysipelatous nature.

By dissection of bodies that have died of this disease we discover in the Brain, Thorax and Abdomen, a dark grumous bloody exudation of Lymph. - Taking this into view together with the external appearances of the disease I think it entitled to a place under the head of Typhus Fever, though it is widely different from that of the Eastern countries.

Nevertheless cases have been recorded which do not appear to be wholly dissimilar to it -

Respecting the causes of our Typhus little has been ascertained. In common with other epidemics it still remains in doubt and obscurity. As yet it has always occurred in cold weather & disappears on the approach of Spring. It would seem therefore to depend upon a low temperature, and this is rendered probable from its being in some degree analogous to a disease which often occurs among poor people during the winter, from long exposure to cold weather.

The patient is affected with such a degree of Torpor & insensibility that it is difficult to arouse him by the application of the

This image shows a blank, aged, cream-colored page, likely an endpaper or flyleaf of a book. The paper has a slightly textured appearance with some faint smudges and discoloration, characteristic of old paper. The left edge of the page is bound into a dark, possibly black, inner cover material. There is no text or other markings on the page.

most stimulating remedies - But when 263
a reaction does take place a slow fever comes
on which has some resemblance to our winter
epidemic -

Like these it is distinguished by a low deli-
-rium, dark tongue & fauces, wild glassy
eyes, and a haggard countenance.

On the other hand it is alleged that it does
not necessarily depend on cold, as its occur-
-rence is not restricted to the winter season.
It is true that some cases have occurred in warm
weather, and here, in ascribing the cause of the
disease we must as in other Epidemics resort
to a vitiation of the atmosphere.

That our Typhus is not a contagious disease
is inferred from the Universality of its preva-
-lence & from its observing the Law of Epidemics.
That this is the case is evident from its forc-
-ing on all diseases its Law - As I have
already mentioned to you in my Pathology
during its prevalence in this city all other
diseases assumed some of its characteristics &
were treated in a similar manner -

The Lancel was abandoned & the stimulating
remedies were resorted to in all diseases.

Indeed we have hardly yet recovered from
the revolution in our practice which the

1870

appearance of this disease produced,

205

Physicians during the winter season do not resort to the Lancel with fear & trembling.

In some instances the Typhus has appeared to be contagious, but they are very few & by no means unequivocal — By those who contend it is a contagious disease, some strange facts are brought forward — Among the Troops on our lines while on their return home their march could be easily traced by the Typhus fever which they communicated to the individuals of every tavern & house at which they halted — It is not impossible that this may have been the Camp or jail fever, which in some instances is certainly highly contagious —

As regards the exciting cause of this disease they are the same as in all other fevers, — as errors in diet, exposure to cold, long waiting, or any thing producing slight derangement of the system —

Treatment — There are two modes by which this disease has been treated — 1st by Stimulants, such as the Camphor, Opium, Pot. Alkali & wine. 2nd by Diaphoretics —

I am decidedly in favour of the latter plan and the opinion of the generality is, that

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diaphoretics are highly beneficial if 207
used in the early stages. Of the means of
producing diaphoresis I have already infor-
med you. My practice is to give the Dover's
powder in doses of γ or xxij grains every two
hours, followed some time after by strong
wine whey, & hot fomentations to the trunk
and extremities - when sweating is easily
produced the recovery is almost certain - In
cases where the debility is very great we must
substitute hot toddy - In order to promote
and continue the sweating we must emp-
loy the external forms that have been
mentioned, as hot bricks plunged into wa-
rm water, or corn boiled in a bag &c, must
be introduced under the bed clothes of the
patient - If called to a patient in the
advanced or last stage of the disease we must
combine with our ~~diaphoretics~~ the introspect
use of cordials and incitants, & here the ~~Robt~~
Alkali is an excellent remedy, I had almost said
an uncommon remedy - We must admin-
ister it with a bold & fearless hand; from
5 to 10 grains every half hour accompanied
with wine - If however the patient still
continues to sink, we must make vesications
by means of the decoction of Cantharides and

Turpentine, or Brandy and Pepper. 209

This is the practice in the simple forms but when great local determination, or accumulation of Billious matter exists we must adopt a different treatment. Emetics are eminently beneficial, both by the evacuation of offensive matter which they produce and by a salutary impression which they make upon the system. To obtain their full effect they should be repeated several times - The Tartar Emetic is best when there is a predominancy of Billious symptoms.

The Emetics should be followed by mercurial purges, as Colomel & Opseead.

After the end of Emetics & Cathartics have been obtained, we must then adopt the same plan of sweating as in the simple forms of fever - To the Topical pains, Blisters must be applied, & in delirium or Coma they should be large enough to cover the whole head - If Pneumonic inflammation attend they should be sufficiently large to cover the chest.

As regards Venesection there has been much difference of opinion: the symptoms of Pneumonic inflammation undoubtedly seem to demand it, but so far as my

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experience goes I have never known it 211
attended with any ~~other~~ than fatal conse-
quences - All the practitioners of this city agree
as to its mischievous effects, but notwithstanding
I shall not pronounce it to be useless
nor injurious in other places, as we all know
that diseases are materially influenced by
local circumstances - In the progress of
this disease the pulse often fails us as a
guide, but the symptoms of great danger
are lassitude, wretchedness, inanimation
and a strongly marked countenance - I
never know a person with this countenance
recover -

Such is the history & treatment of
the American Typhus - It originated about
10 years ago & has proved a terror to citizens &
practitioners. But I am happy to inform
you that by the practice I have just laid
down, it has proved in this city a manageable
disease. The number of deaths it has occa-
sioned are far less than those by the Yellow
Fever - But great, very great perseverance
is required in the use of the remedies -

Yellow Fever

In continuance of the history of our Epidemics I shall next proceed to the consideration of Yellow Fever - It is not my intention however to occupy your time with a complete history of this disease - It would require more time than I can appropriate to it, nor is it necessary to dwell at length on the subject. The writings of Dr Rush are replete with details respecting this disease, & to him & others I refer you for full information - As you perhaps know, the yellow fever is endemic to all tropical climates, but in the West Indies it is of more frequent occurrence than in any other part of the world - It appears to have occurred in this country in the early colonization but never until the year 1793 did it arrest the general attention of physicians -

There is hardly a point respecting this disease which has not been a subject of great controversy - Its origin, nature, & treatment have all been equally controverted and in many instances the disputes have not been conducted with much courtesy or politeness.

It is not my intention to revise them. 215

but it is my duty to examine to a certain extent the points which have been discussed.

As relates to the introduction of this disease the disputes are entirely verbal: they are disputes about words. It is admitted on all sides that in every instance which occurred in this city it originated in vessels. In the year 1793 when it first visited us ~~most~~ of the practitioners of the city referred it to a cargo of Putna coffee which was thrown out of a ship at the wharf. By some it was supposed that the local filth of the city was also an accessory & even a primary cause of the disease. But do not think that local filth under any circumstance is capable of producing an epidemic of this character. If it were why do not the exhalations which arise from our docks and gutters cause a yellow fever every season. This city is not more cleanly now than formerly, and at all times it abounds in exhalations. But independent of this, we have more direct evidence in support of this opinion. The scavengers who are constantly employed in removing the filth of the city were singularly exempt from the fever during its greatest prevalence.

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Among many interesting facts, Dr Rush 217
relates that in the fever of 1798, out of 50 scav-
engers in this city only one solitary case
of yellow fever occurred among them.

Can any thing be more conclusive to shew
that the exhalations from the filth of the
city was not a cause of the disease. It may
be alledged that these men from their constant ex-
posure to them, had become habituated to their
impressions & therefore insusceptible to the dis-
ease which they occasioned in others. This
might have some weight if the same men had
been for a long time employed in removing the
filth of the town, but the men mentioned by
Dr Rush had never been employed as scavengers
before the prevalence of this epidemic.

While I so far coincide in the doctrine of
importation, I by no means wish to be under-
stood that I hold the disease to be imported in its
ready formed state. My impression is, that ships
becoming exceedingly filthy on their passage may
be put into a condition to engender it, though
they will not import it in a state of contagion.

Whether the effluvia arising from them will
under all circumstances produce the disease I shall
not say - This may be, but there is no evidence to
that effect.

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Perhaps they require a certain condition 219
of the atmosphere to give them activity. This
would seem to be the case from the exhalations
of vessels which are constantly arising not ex-
citing fever.

Much debate has existed as to its contagious
nature. That this is not its general character
would seem to be proved. Not to lengthen
the discussion however, I shall content mys-
elf with mentioning some of the leading arg-
uments on the subject. It is alleged that
it is not contagious 1st because it is of a char-
acter during its continuance in which all the
diseases assumed some of its characteristic sy-
mptoms - 2nd In its not extending beyond
the city - It is true that in the Hospital at a
short distance from this place which was
opened for the reception of the sick people
of the city, there was not a single instance
of Yellow Fever being produced by affected
persons 3rd By its being uniformly suppre-
ssed by cold weather -

On the other side of the Question there are
also some important facts - 1st It is alle-
ged that it begins at a point & spreads from
thence in various directions - Thus when
it occurred here it was observed to commence

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at one wharf (arch Street) from whence 221
it diffused itself over the whole town -

2nd There were some cases in it that was actually communicated by contagion from individuals who removed from the city to the country - of this there were many instances and among them some very conclusive ones were collected by Dr Wistar; some families in the country into which affected persons had removed from the city were attacked by the disease -

3rd It was said to be communicated by the clothes of persons who had died of the fever. One or two facts of this kind are to be found in the writings of Dr Rush, & in the reports of the college of Physicians -

4th It is said that it never affects the same person twice, & in this it is obedient to the laws of contagion - On the latter point there is much diversity of opinion; while some positively declare that it never occurs twice in the same person, others pronounce with decision that there has been many instances of its being taken twice by the same persons

Dr Griffiths of this city who is as conversant as any body with the yellow fever states that at least in 1000 patients whom he

attended he positively never knew it 223
to occur twice in the same person - On the
other hand it is asserted by authority of equal
weight, that instances of its affecting the same
person twice are exceedingly numerous.
In consulting foreign writers we find the
same diversity of opinion: By those of the
West Indies it is said to occur once, and no
more. Of late this question has excited
much attention. The British Government
from the prevalence of the Yellow Fever
in the Mediterranean, instituted a board of
Physicians, thoroughly to examine the sub-
ject. It consisted of the oldest and most
experienced Physicians - After the fullest
and most extensive enquiries, & on the ma-
jority deliberation, they concluded 1st That
Yellow Fever is eminently contagious -
2nd That it is only taken once. On this latter
point the facts stated are many & satisfac-
tory. It is asserted with decision that at Gib-
-raltar & Cadiz there has not been a solitary
instance of a second attack. Further it is
stated by the Physician General of the mil-
-itary at Cadiz, that having heard in the West
Indies when a person had once had the dis-
-ease he lost all susceptibility to the contagion

he resolved to make an experiment. 225-

He therefore selected all those soldiers who had had the disease in the West Indies and caused them to wait upon the sick & although they were constantly near them and waiting upon them, not a single one took the disease -

If this is a fact it certainly goes far in support of the statement that the disease can occur but once in the same person — Now as to the origin of Yellow Fever, at least in the Mediterranean is the evidence of a less direct nature. In Cadiz it has been traced distinctly to vessels. The report states that it is not generated domestically, for the most dirty & filthy parts of the town were exempt from the disease, and also that side of Cadiz near which there is a large marsh, was not reached by the Yellow Fever. From this it would seem that Marsh miasmata was not a cause of the disease, as it is of Billous Fevers. Besides this there is evidence of a still stronger nature in the Mediterranean as to the origin of the Yellow Fever - The Garrison of Gibraltar which is situated on a rock completely removed from the source of disease, & kept exceedingly clean by the

severity of military discipline, & yet 227
this disease has here prevailed to a consider-
-able extent - It is asserted & upon good
grounds to have originated from a vessel, for
as soon as she had arrived at the Garrison
it began to prevail.

Enough has now been said to show
how contradictory the evidence is respect-
-ing this disease - It is indeed very difficult
for a cautious mind to arrive at any con-
-clusion on the subject - There does not
seem any thing absurd in the opinion that
Yellow Fever may be propagated by conta-
-gion: Typhus fever which is not dissimilar
to it is among the most contagious of dis-
-eases - It is said that this is not commu-
-nicated by real contagion, but by the exha-
-lations of the excretions being allowed to
accumulate in the apartments of the sick.
But I have known it in Europe to be
communicated from one person to another
notwithstanding every attention was paid
to cleanliness - Besides if Typhus were
communicated in this way it would be
as diversified as the nature of the sources
must be - Thus if the urine, Faeces or
perspiration were allowed to accumulate

they would occasion different forms 229
of this disease. But in Hospitals it is always
the same, except with some difference in its
degree of violence or some slight modifications
from constitutional peculiarities -

By Haysgarth and Gregory & some others it has
been proved that Typhus is as contagious
a disease as Small Pox - It is likewise true
that it is not contagious beyond a few feet.

Let every attention be paid to cleanliness
of the patient and his chamber, then let
any person be placed within the sphere of
contagion, & he will certainly get the disease
Does not this show that the contagion comes
from the patient himself & not his excre-
-tions -

As I formerly told you all contem-
-gions are the result of a secretory action.
The variolous matter differs from the Typh-
-ilitic virus because in the two cases the
secretory vessels are acted upon by stimuli
of a different nature - now if the extreme
vessels have secrete contagion why may they
not do the same in Yellow fever - In this
disease perhaps it happens when the case
is long protracted and connected with Ty-
-phus action - This is the case with

124
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Dysentery, which under ordinary cir- 231-
-cumstances is not contagious, but when as-
-sociated with Typhus action it really becomes
so. This is not speculation for I have seen
it occur in many instances. I do not think
there is any force in the argument that
Yellow fever is not a contagious disease
from its not being communicated from
patients brought into Hospitals or from
dead bodies while dissecting them - I admit
that it is not at all times contagious - Even
Typhus which all allow to be highly con-
-tagious is not so under every circumstance.

Where free ventilation exists it is never
contagious - It is seldom of this character
in the West Indies. & the reason is obvious
owing to the warmth of the climate the do-
-ors and windows are thrown open, which
thus freely admits the air - Even the Pl-
-ague which is a most contagious dise-
-ase is not propagated from dead bodies

It is not my wish to impress upon
you any particular opinion - The whole
grounds being laid before you, you must
judge for yourselves - It appears to me
that we have too hastily abandoned the
old opinion that the yellow fever is a

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contagious disease - It is true that 233
fevers are not contagious under certain
circumstances - But they become so particu-
-larly when they take on a Typhus action.

Treatment of Yellow Fever

Enough has been said to show you
how extremely unsettled the points of theory
are respecting Yellow Fever - It is my
deliberate opinion that though it is not imp-
-orted in its ready formed state, yet that it is
derived from the exhalations of vessels coming
from tropical climates - To this opinion I
am conducted by well established facts, for it
has always been distinctly traced to ships -
In 1793 all allow that it arose from a cargo
of coffee which was thrown upon the wharf in
a putrid state - Consulting the writers of
1798 one of the periods in which this fever
prevailed, we find that the only dispute
as to its origin was, whether it originated
from a French or West India ship -
As to the contagious nature of this fever I
am equally well satisfied - This is not I
believe its general character, it is rarely
contagious, and indeed never unless in
protracted cases that have taken on a Typhus action.

It is unquestionably a law of diseases 235
that they become contagious when long pro-
tracted; of this truth I am well satisfied.

As respects the nature and treatment
of Yellow Fever, not less difference of sentimen-
-ent prevailed - By one set of practitioners
it was maintained to be a disease of febrile
action, & hence it was entitled Typhus Febrilis
Another set however entertained an opposite
view - What the symptoms are in the West
Indies I do not know, but as it appeared in
this city & other parts of the United States
it certainly was of an inflammatory nature.
It would be impossible to detail to you the
various forms under which it appeared In
no two seasons did it exhibit the same sym-
-ptoms or demand the same treatment; but
on the whole being always characterised by a
high action, it was treated by modifications
of the depleting plan - At first it was sup-
-posed to be of a Typhus nature & was tre-
-ated accordingly, though this practice con-
-tinued but for a short time.

To Dr Rush is due the credit of having
disseminated this error, though his own opi-
-nion on this subject was no less errone-
-ous, for as you know he maintained

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That this disease was only an aggravated 237
form of our Billious inflammatory fevers.

That this is not the case is evident from the
dissimilarity of symptoms in the two dis-
eases. The Hepatic system you know is the
seat & throne of our autumnal fevers; these
are admitted universally to be Billious, but
in relation to this epidemic the reverse of
this is allowed to be the case. No symptom
of Bile or hepatic derangement are here ex-
hibited; they all point to the stomach as being
chiefly concerned; and what was suspected
came afterwards to be proved by dissections,
that the stomach was uniformly found to
be the seat of the disease.

The dissections were principally made by Dr
Physick who was connected with the Hospital
of the Yellow Fever patients, & whose opportuni-
ties were great. - From his reports it appears
that the stomach abounded with morbid ph-
enomena - There inflammation existed in all
its stages, from the slightest suffusion or
blush, to mortification itself. In some ca-
ses it was extended over the whole organ
and in others it consisted only of reddish
streaks about the Pylorus.

What was called the Black vomit or the

178. The second day of the month
was a day of great beauty and

6 sees an altered section of the
Hornet and

The first day of the month was a day of great beauty and
the second day of the month was a day of great beauty and
the third day of the month was a day of great beauty and
the fourth day of the month was a day of great beauty and
the fifth day of the month was a day of great beauty and
the sixth day of the month was a day of great beauty and
the seventh day of the month was a day of great beauty and
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discharge of a black fluid from the 239
Stomach, which took place only in the most
violent cases of inflammation, did not consist
of a vitiated bilious matter. Independent
of the above evidence this is rendered certain
by the black vomit being a concomitant of
all gastric inflammation. - I have seen it
in Puerperal Fever and in Hydrophobia,
in which diseases the stomach is affected. I
have also seen it in Displaced Gall when
seated in the Stomach; and it arises from
the inflammation of this organ produced by
violent poisons...

Not the smallest appearance of disease
was discovered by Dr Physick in the Liver
or its appendages; there were in a perfectly
natural state, & likewise the contents of the
other great cavities - In the Brain there
was no disease except in a very few cases, &
here it was so trifling as hardly to merit
attention -

Admitting the accuracy of Dr Physick's re-
ports, & we have no longer any reason to doubt
the nature of the Yellow Fever - But inde-
pendently of this authority many physicians
have made similar experiments with simi-
lar results; and we are forcibly conducted

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The first of these is the fact that the
population of the country has increased
very rapidly in the last few years.
This is due to a number of causes.
The first is the fact that the country
is very fertile and the soil is very rich.
The second is the fact that the climate
is very pleasant and the weather is very
good. The third is the fact that the
people are very industrious and the
country is very well governed.
The fourth is the fact that the
country is very well situated for trade
and commerce. The fifth is the fact
that the country is very well supplied
with food and clothing. The sixth is
the fact that the country is very well
supplied with education. The seventh
is the fact that the country is very
well supplied with health and medicine.
The eighth is the fact that the country
is very well supplied with religion and
morality. The ninth is the fact that
the country is very well supplied with
science and art. The tenth is the fact
that the country is very well supplied
with music and poetry. The eleventh
is the fact that the country is very
well supplied with dance and drama.
The twelfth is the fact that the country
is very well supplied with games and
sports. The thirteenth is the fact that
the country is very well supplied with
recreation and amusement. The
fourteenth is the fact that the country
is very well supplied with travel and
tourism. The fifteenth is the fact that
the country is very well supplied with
transportation and communication.
The sixteenth is the fact that the
country is very well supplied with
industry and commerce. The seventeenth
is the fact that the country is very
well supplied with agriculture and
fishing. The eighteenth is the fact that
the country is very well supplied with
mining and metallurgy. The nineteenth
is the fact that the country is very
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engineering. The twentieth is the fact
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with construction and architecture.
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and engineering. The twenty-sixth is
the fact that the country is very well
supplied with construction and
architecture. The twenty-seventh is
the fact that the country is very well
supplied with transportation and
communication. The twenty-eighth is
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to the conclusion, that this epidemic 241
is widely different from Billous Fever.
At one time the opinion as to their iden-
-tity being entertained by Physicians the
practice was dictated accordingly, & this
consisted of Emetics & Purges. Such as Tart:
Emed.: Calomel, Jalap, Gamboge, &c accom-
-panied with Bloodletting.

To this general Plan was added some
subordinate treatment suited to certain
symptoms which were present in the
disease - While this was the practice of a
large majority of the Physicians of this city
a different one was adopted by several Me-
-dical Practitioners, who had resided in the
West Indies - Disclaiming the utility
of evacuations they addressed their remedies
to the Stomach, to allay the irritation of that
organ. - The first effect was to check vom-
-iting, & to wash out the stomach with mild
beverages - They resorted to the ordinary
means of allaying the irritation, especially
fomentations to the Stomach, & the warm
Bath - What was the comparative suc-
-cess of these two modes of treatment I can-
-not positively say, but there could have
been no great difference between them, each

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must have been ineffectual as may ²⁴³
be concurred from the great mortality in
both cases - The French however possessed
one advantage in their plan, that is, its great
simplicity, & it continues to be advocated
by some even to this day.

Encouraged by the success of the
Mercurial practice in the West Indies
it was tried in this City - The fevers of
Tropical climates are certainly better treated
by mercury than any other remedy - To this
we have the testimony of most of the prac-
titioners of the West Indies, especially Dr
Christholm, who treated them exclusively with
mercury - He exhibited Calomel in the
largest doses and also employed mercurial
ointment - The amount of mercury taken
is hardly excusable - The object was to induce
a Salivation as quickly as possible, and the
medicine was poured into the system through
all its avenues -

Such appears to be the practice in
the West India Islands, as soon as their dis-
eases appear to be bilious it is perhaps
the best - When this mode was first used
here it was thought so good that it exclu-
ded every other - In the plenitude of

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their confidence Physicians declared if
a salivation was induced, the cure was cer-
tainly effected, and for a time mercury was
considered a specific remedy. But cooler
reflection soon exposed this delusion, & all
came to distrust it. Nevertheless I do not
deny that a salivation may cure the disease.
Two actions so dissimilar as that of Mercury
and Yellow Fever cannot exist in the sys-
tem at the same time, & when it is under
the mercurial action the fever must yield.
But the difficulty is to induce the oper-
ation of this medicine sufficiently soon.
The disease is of such immense force & so
rapid in its progress as to afford little time
or chance for the Mercury to produce that
state of the system which would prove
beneficial. Long before a salivation could
be induced, in most cases, the patient would
sink by the ordinary termination of the
fever. But perhaps it is true as I have
already said that when a salivation does
take place it may cure the disease, but
such an effect is never produced in violent
cases, & in mild ones in which it is obtained
it might have been cured without it.
By dissection the seat of the disease is

T. Lee the patentee sometimes cash

1000 or 24 months in bonds or cash

found to be in the stomach. as most 247
of the phenomena would warrant us to
suppose, the gastric being the predom-
inant symptom - In an ordinary case the
symptoms resemble the effects of violent
poison taken into the stomach. Yesterday
upon asking Dr Thysick what yellow fever
resembled, he answered "the effect of arsenic
when swallowed. As this point became
better understood a more suitable and
efficient treatment was introduced - Called
to a case of Yellow Fever we must meet
the inflammation of the stomach by the
free use of the Lance; we must take from
20 to 30 $\frac{1}{2}$ of blood at once & repeat the op-
eration within a short time afterwards.
Dr Jackson told me that in the West Indies
he drew at the first bleeding from 60 to 100 $\frac{1}{2}$
of blood - the quantity is large & hardly cre-
dible, but he repeated the operation before
a number of Physicians of this city - Totally
regardless of syncope, he would assure the
patient that the stream of blood might
continue & He said that such a revolution
in the system was produced that no vestige
of the disease remained, & all he had to
contend with was the consequent debility of the patient.

I do not recommend to you this 249
practice, but it is due to Dr Jackson to men-
tion that he is a Physician of great respecta-
-bility & of unquestionable veracity.

The object being to subdue the infla-
-mation of the stomach. venesection must
be profusely employed, we must not here
be guided by the pulse, for a depressed pulse
accompanies the most violent inflammation
of the alimentary canal, & by venesection
we develope it. As auxiliary to venesection
cathartics to evacuate the alimentary canal
should be early employed - Emetics were
once used, but when it came to be known
that the stomach was inflamed they were
universally abandoned. In place of these
mercurial purges were substituted, & the
drastic cathartics were combined with them
but I think this combination was misch-
-evous. From the peculiar properties of
Calomel it may be given with the greatest
safety in cases of high inflammation. It is
more active than Castor oil, & is productive
of no injury in Dysentery - In the Yellow
Fever it must be employed in the largest
doses, for among the peculiarities of this disease
is an insusceptibility to the action of purgative ~~meds~~

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I have seen ʒj of Calomel prescribed 251
and the ~~evacuation~~ not more than was withd.
But in general it was given in doses of 10
or 15 grains every hour ~ The bowels being
evacuated are to be kept open by mild
Purgatives ~

Much good was certainly derived in
this disease from early sweating, & by some
indeed it was exclusively trusted to: though
a much better plan was to postpone it
until after the other depleting remedies
had been employed ~ To effect diaphoresis
the most active means were employed, but
the external modes are the best, as the Ba-
pau Bath. The disease is characterized
in all its stages by irritability of the stom-
ach, & hence the internal diaphoretics are
not suited to it. Neither Antimony or Ni-
tre are long retained on the stomach ~ The
Dover's powder were sometimes beneficial
but the most approved diaphoretics were
Eupatorium Perfoliatum, Sp. Mindereri, and
the Saline mixture ~

In many cases in which there was great
heat of the surface, cold applications were
found beneficial especially in the West
Indies ~

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But while we are pursuing our 253
general treatment we must always bear in
mind that the stomach is primarily affec-
-ted, & that the whole train of symptoms
are secondary of this - In our local treat-
-ment therefore we should first apply a
Blister to the region of the stomach, but it
should be large enough to cover the whole
of it and be frequently repeated. As the
disease advances Blisters may be applied
to other parts, as the extremities. It was
found that this quiesced the irritability of
the stomach, raised the pulse & induced
sleep, and often restored the regular action
of health - Among the local affections are
nausea & vomiting - to relieve them I have
no new remedies to offer you, those al-
-ready mentioned were employed, as lime
water, Serpentina, Saline mixture &c.
All were found good in the advanced sta-
-ges - Also small doses of the Oleum Turbin-
-thina 10 or 15 drops every half hour - The
Liniment of Cloves was sometimes beneficial
but only after the febrile action was in
some degree subdued, from its being of
a highly stimulating nature -
After all as the symptoms depend

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upon an inflammation of the stomach 255
they can only be radically subdued by
overcoming this inflammation by reses-
-ction & the other depleting remedies -
Another local affection is Delirium, this
is to be relieved by local depletion with
Leeches, cups, &c. - In the beginning
much benefit is to be derived from cold
applications & Blisters sufficiently large
to cover the whole head -

At Yellow Fever Remits or Intermits,
every other day - Bark was used & though
given in the intermissions, the irritability
of the stomach was so great, that it was
either useless or injurious, & was therefore
laid aside - The Bitters were substituted
in its place as Luofia &c. and though less
injurious they were productive of no
advantage - At one time Opium was
used to quiet the irritability & comfort
the patient, but little advantage was der-
-ived from it. It had the effect of light-
-ening the fever which was the only benefit
resulting from its use. In the form of
enema, towards the close of the disease it
was used in the quantity of $\mathfrak{z}\text{ij}$ or \mathfrak{v} of the
Tincture with some advantage -

Such was the practice universally 257
adopted in the Yellow fever of this City.
If we were called upon to treat this dis-
-ease, this plan if properly pursued would
prove useful as often as could be expected
in a morbid malarial of such a nature.
But he who says or thinks it is a disease
not difficult to manage, & may be cured
with certainty, doth in the Language of
the Holy Book deceive himself and
the truth is not in him.

Pestis or Plague.

As having in many respects a close analogy
to yellow Fever I now proceed to give some
account of Pestis or Plague - As I never saw
this disease all that I shall give you will
be a digest from the most interesting com-
-munications that I have been able to pro-
-cure upon the subject -

By Cullen who considered it a highly
contagious disease & connected with a Sy-
-phoid Type, it was placed among the
Exanthemata - Whatever connexion exists
between the Plague & the Exanthemata, I
do not consider it properly located,

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I have been thinking much lately
of the many things which
we are called upon to do
and how often we fail to do
them. I have been thinking
of the many things which
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and how often we fail to do
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Letter to a Friend

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of the many things which
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we are called upon to do
and how often we fail to do
them. I have been thinking
of the many things which
we are called upon to do
and how often we fail to do
them.

It is undoubtedly accompanied with 259
symptoms of a febrile nature, & ought to
be associated with them -

It is only a few years since we acquired any
accurate information relative to this disease.
whenever it occurred it inspired such ter-
-ror as to retard its deliberate investigation.

During the invasion of Egypt by the
French, the physicians of both armies av-
-ailed themselves of the opportunities that were
-offered, & have contributed not a little to
our information on the subject - Contra-
-ry to previous impressions they have shown
that the plague is contagious but by no
means so much so as was formerly sup-
-posed. Casual intercourse with the sick
does not produce it; neither the Physicians
nor Nurses contracted it in their atten-
-tion on the sick, and dissections were carried
on with perfect impunity - It would seem
from reports that it proved contagious in Hos-
-pitals that were crowded and not properly
ventilated, & even then it was not more so than
our common autumnal fevers. It was only
contagious when at its acme & during perspi-
-ration. Disclaiming therefore contagion
as the cause of this disease those physicians

It is manifestly necessary
to have a complete
knowledge of the
principles of the
art of writing
in order to be able
to write with
ease and grace
and to be able to
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hand which may
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to be able to
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the principles of
the art of writing
in order to be able
to write with
ease and grace
and to be able to
write in any
hand which may
be required
of us.

considered it as an epidemic arising from such causes as commonly procure these maladies -

As regards the origin of the Plague in Egypt it undoubtedly results from the exhalations of the Nile. To establish this point they bring conclusive & satisfactory evidence. It is always found to follow the recession of that river which as you all know periodically overflows its banks. The filthy surface thus exposed after a while becomes perfectly dry by the intense heat of the sun and as soon as this is effected the Plague uniformly ceases. Like fevers originating from Marsh Miasmata it assumes different types, such as the Remittent & Intermittent but more commonly the continued form of fever. It also sometimes assumes the Typhus and at others the Inflammatory stage. These varieties occur from local causes - An English writer (Dr McGregor) tells us that when it breaks out in the crowded Military Hospitals it was always of a low Typhus nature: but when it appeared among the soldiers in the open camp it was of an opposite type.

Admitting this account of the plague to be true, still it is not easy to resist

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the conviction that it has at other times
 been highly contagious - I shall not repeat
 the stories relative to this point with which
 the medical records abound - they are pro-
 bably exaggerated, & not worthy your atten-
 tion, yet it is not right wholly to overlook
 some facts that appear to come well auth-
 enticated - I shall say nothing of the
 opinions of any writers except those residing
 in Egypt, nor shall I dwell upon the cir-
 cumstances of its having been brought into
 Europe by Cornites, by which in Pathological
 language is meant clothes, bales of Goods
 or any thing by which contagion may be
 conveyed, But I must say that though
 in Egypt the Plague may be Epidemic, &
 propagated like others of the same class. yet
 elsewhere, & at other times it has proved
 contagious - In Europe there is more than
 one instance of persons having entirely es-
 caped it, by avoiding the contagion - we are
 informed by good authority that during its
 ravages at Rome in 1667 when the whole
 of that great city was pervaded in every
 part, by this dreadful malady, & the mortali-
 ty inconceivably great, those who were
 secluded in monasteries some of which

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were in the very heart of the City remained in the most perfect health. It is also said that when it prevailed at Merselles a similar security was obtained by raising barriers between the sick & healthy.

On this point we have the direct testimony of authors who visited those places - But it is contradicted by authority of equal weight, so that we are compelled to receive it with some doubt. In Egypt at least, it is probable that it is not contagious in a high degree -

Consulting the history of the two diseases there appears to be a great similarity between the Plague & yellow Fever. They arise from similar causes & occur in the same season of the year; they attack strangers in preference to natives; they destroy a susceptibility to a repetition of the disease. They are both contagious under the same circumstances, & are imported in the same manner. But there is a wide difference between them, owing most probably to the influence of climate, religion, manner of living &c. It would appear from accurate accounts, that the plague as regards Egypt & the Orientals

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Countries, is a highly malignant disease - This is owing no doubt to the filth & poverty, & crowded habitations of the miserable people of those regions - But as I have already intimated it seems that among the troops it was a disease of an inflammatory nature - Carbuncles & Boils were considered as characteristic symptoms of the Plague; but they are by no means confined to it - I have seen them in Yellow Fever and they generally appear in Typhus Gravior of a protracted duration -

Treatment. Determining from the best source of information, there does not seem to be any material difference in the treatment of Plague & Yellow Fever - It was usual to begin with Emetics, in this it differs from the treatment of Yellow Fever as present - There were used in Plague from the supposition that the cause of the disease was seated in the Stomach, & might be removed by a timely administration of Emetics. They were used also in cases of Biliary symptoms, & particularly when there was remission - The Alimentary canal being thus relieved they next employed very copious Venesection - This is an ancient practice

which was resorted to as long ago as the time of Boetius & was afterwards employed to a much greater extent by Sydenham & Ruyssch also who had an opportunity of seeing much of this disease, used it with advantage, but he thought it best suited to those cases where there was local determination or congestion. Among the Physicians of the English & French armies venesection was by some employed to great extent, while by others it was wholly excluded from their practice.

It appears from an examination of all that has been said, that the truth lies between these two extremes. Sweating has also been long the established practice in this disease. It seems to be indicated by nature as there is a tendency to spontaneous perspiration, and it has been urged to a great extent from a notion that the disease depended upon a morbid matter floating in the system which it was necessary to expel before a cure could be effected. It is not easy to collect from modern writers, when is the most proper period to apply sweating, & to what extent it should be employed. It appears however that there

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is a point to which it is entitled 271
and that the mild diaphoretics were generally preferable. The external modes were perhaps the safest and most advantageous. Conforming to the fashion of the day the English employed cold applications in various ways to the body, such as dashing cold water, or sponging it, with decided advantage: Recently the body has been rubbed with cakes of Ice - By a Russian more benefit was obtained from it in this way than in any other. It is alleged in further confirmation of the utility of cold applications that many patients under delirium plunge into the Nile, and when they are drawn out the fever was either much abated or entirely subdued. It is stated by Savary that a sailor who had the Plague jumped overboard, & recovered a short time after he was taken out of the water.

It is also stated that at one time Buonaparte gave orders for his army to march while a number of his soldiers had the Plague, they had not gone far before they were overtaken by a storm of rain, by which a considerable number of cases were effected.

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External applications of a different 273
nature are said to have been beneficial -

It is stated that about half a century ago
the rubbing of sweet oil upon the body pro-
-ved very efficacious - Baldwin the Council
General of Egypt stated that the oil so appli-
-ed protected the individual from the Plague,
and this was corroborated by his successor
~~Mr~~ Jackson - But by a repetition of this pra-
-ctice by physicians it is found that though
it possesses some advantages it is incompe-
-tent to a cure; all that was derived from
it was a temporary abatement of the irri-
-tation of the patient - In the advanced
stages Blisters were found very beneficial
especially in local affections of the head &
Stomach - Camphor, Opium, &c were res-
-orted to, but though the Brunonian plan
was tried in its fullest extent it compl-
-etely failed - Experiments were made
with mercury, but in this the same objection
to it exists as in Yellow Fever - Though
a salivation might effect a cure, the disease
is so rapid that the necessary impression
cannot be easily enough induced -

We see to judge from all that has
been said on this subject it would seem

notwithstanding all the early accounts ²⁷⁵
that the Plague is not a more violent or
intractable disease than our Yellow Fever,
by the bills of mortality it appears that the
deaths have not been more numerous in
the one than in the other - - By Dr D -
it is stated that during the prevalence of
the Plague in the Army of Egypt about
 $\frac{1}{3}$ of the patients in the great Military
Hospital died. Precisely the same occurred
in our Hospital for the reception of Yellow
Fever patients - -

Perhaps it is known to you that Dr Valli
who distinguished himself by his Electrical
and Galvanic experiments lately paid us
a visit - Before he came to this country he
went to Alexandria & Aleppo to experiment
on the Plague - During his short residence
in this city he communicated to Dr Wistar
the result of his inquiries which were as
follows -

- 1st The Plague is a contagious disease -
- 2nd It is rarely taken more than once.
- 3rd The infection may be communicated
to persons, by rubbing the matter of carbun-
cles on them -
- 4th The pestilential matter mixed with

the following are the only reasons
for the delay in the completion of
the work. The first is the
want of a sufficient number of
men to do the work. The second
is the want of a sufficient number
of materials. The third is the
want of a sufficient number of
tools. The fourth is the want of
a sufficient number of horses.
The fifth is the want of a
sufficient number of wagons.
The sixth is the want of a
sufficient number of drivers.
The seventh is the want of a
sufficient number of mules.
The eighth is the want of a
sufficient number of oxen.
The ninth is the want of a
sufficient number of sheep.
The tenth is the want of a
sufficient number of pigs.
The eleventh is the want of a
sufficient number of chickens.
The twelfth is the want of a
sufficient number of ducks.
The thirteenth is the want of a
sufficient number of geese.
The fourteenth is the want of a
sufficient number of turkeys.
The fifteenth is the want of a
sufficient number of rabbits.
The sixteenth is the want of a
sufficient number of cats.
The seventeenth is the want of a
sufficient number of dogs.
The eighteenth is the want of a
sufficient number of birds.
The nineteenth is the want of a
sufficient number of insects.
The twentieth is the want of a
sufficient number of plants.
The twenty-first is the want of a
sufficient number of trees.
The twenty-second is the want of a
sufficient number of flowers.
The twenty-third is the want of a
sufficient number of fruits.
The twenty-fourth is the want of a
sufficient number of vegetables.
The twenty-fifth is the want of a
sufficient number of grains.
The twenty-sixth is the want of a
sufficient number of seeds.
The twenty-seventh is the want of a
sufficient number of roots.
The twenty-eighth is the want of a
sufficient number of leaves.
The twenty-ninth is the want of a
sufficient number of stems.
The thirtieth is the want of a
sufficient number of branches.
The thirty-first is the want of a
sufficient number of twigs.
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sufficient number of bark.
The thirty-third is the want of a
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The thirty-fourth is the want of a
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The thirty-fifth is the want of a
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The thirty-sixth is the want of a
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The thirty-seventh is the want of a
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The thirty-eighth is the want of a
sufficient number of paint.
The thirty-ninth is the want of a
sufficient number of oil.
The fortieth is the want of a
sufficient number of vinegar.
The forty-first is the want of a
sufficient number of wine.
The forty-second is the want of a
sufficient number of beer.
The forty-third is the want of a
sufficient number of spirits.
The forty-fourth is the want of a
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The forty-fifth is the want of a
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The forty-sixth is the want of a
sufficient number of shelter.
The forty-seventh is the want of a
sufficient number of medicine.
The forty-eighth is the want of a
sufficient number of weapons.
The forty-ninth is the want of a
sufficient number of tools.
The fiftieth is the want of a
sufficient number of materials.

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the variolus & applied to a person 277
who has had neither the small Pox nor
Plague - will communicate a mild plague
and protect from future infection -

5th The Plague is less mild in a person
who has had the small pox previously
than in one who has never had it -

6th If the pestilential matter is mixed
with oil & applied to the body it will
communicate a mild plague & protect
the person from future infection -

Dr Kalli drew these conclusions after making
upwards of 300 experiments - So far
as I know he is entitled to credit - In
the Eastern countries he was a long time engaged
in the investigation of the nature of
pestilential diseases - He then came to
Philadelphia for the purpose of experim-
-enting upon the Yellow Fever! this disease
not occurring here he went to the West
Indies, where he felt a victim to it -

I have now gone over the history
& treatment of all fevers - I
first spoke of Intermittent, Remitt-
-ent & Continued, then of air & Typhus
and Yellow Fever, & lastly of the
Plague which constitute all the forms of fever,

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Hectic Fever

We have now come to that part of the course in which it will be proper to treat of Hectic Fever - Fevers have been divided into Idiopathic & Symptomatic - Of all the distinctions introduced by Nosologists perhaps this is the most absurd & unprofitable. Every fever whatever may be its nature is necessarily secondary & sympathetic. To establish this point we need only recur to the origin of the different febrile affections. The position is admitted without controversy as regards fever arising from wounds and other injuries, nor is it less obviously true as regards those which are caused by inoculation, & the introduction of virus into the system, on the same footing must be placed the similar affections produced by the action of poisons as Arsenic, Opium & the other Narcotics and virulent articles - The position then as I have been shown is so indisputable, but by tracing the phenomena which presents themselves we shall find that it is not less true when applied to what are called Idiopathic Fevers -

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Each of these is caused by Marsh effluvia ²⁸³
or Contagion. It is now a point sufficiently
ascertained that morbid matter can enter into
the system in no other way than by being enta-
-ngled with the Saliva, and thus swallowed,
-hence it follows that the primary operation
is on the stomach, and that the blood vessels
are affected by means of a sympathetic connec-
-tion between that organ & the rest of the system.

It must be confessed that there are some who
believe that the Lungs are the avenue by which
these effluvia pass into the system, or the portion
which they operate - but the latter opinion is dis-
-proved by the insensibility of these organs to im-
-pressions made upon them, and the former by the
fact that no one constituent part of the atmos-
-phere is admitted by the Lungs, most conclu-
-sive experiments have shown that it is the
function of the Lungs to throw out matter
and that nothing in the place of what is
lost is received by them - But whether this
is the case or not, the rectitude of my hypothesis
remains unaffected, as the Lungs instead of the
stomach would be the point of communication

My theory of Fever is simply this - I suppose
that the disease originates in local irritation
which spreads itself more or less according to

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circumstances; starting from a central 283
point it is extended by means of ^{the} sympathy
of the system with the part in which it was
first excited - and when more intense, if not early
arrested, diffuses itself by a multiplied chain
of associations, till the whole animal economy
is to a greater or less degree involved - These
are the remarks which I thought proper to make
previous to entering on the consideration of Ec-
tetic Fever -

This disease is most commonly connec-
ted with Pulmonary Consumption, though other
causes sometimes produce it. Whatever greatly
irritates the system may excite Ectetic Fever.
Formerly it was generally believed, & is even
at present maintained by some that this
fever is occasioned by the absorption of matter.
But Hunter has proved that this cannot
be the case, because it often occurs when there
is no abscess - and contrarily that the absorp-
tion of the largest accumulations of matter
does not excite it.

Besides Pulmonary Consumption, Ectetic
Fever accompanies other diseases -

1st It is to be met with in what are called
white swellings of the joints, and also in
Gout & Rheumatism -

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2nd It is found in Scurious & Schrophulous 285
affections, and Ulcers in every part of the body
particularly in the glandular structures, as the
Mammary, the Ovaries, Uterus, the Liver &c.

3rd It attends congestions & atresction of the
viscera when there is neither abscess nor ulceration.

4th It is to be met with in cases of simple
irritation, as when there is a stone in the blad-
-der or Gall Duct. or even when inflammation
has resulted from the puncture of a pin or needle.

5th It sometimes takes place in pregnancy
merely from the irritation to the general
system occasioned by the Gravid Uterus &
its contents.

This disease partakes of the type & general
nature of Intermittent Fever. The two cases
have indeed so many points of similarity
that they may sometimes be readily confoun-
-ded - but there are certain circumstances by
which they may be distinguished and it is
of importance in a practical point of view
that these should be recollected. -

1st The paroxysm of Ectetic Fever is rarely
regular for any number of days in succession
but after a short time comes on without any
established order at almost every hour of the
day and night.

The main body of the page contains several paragraphs of extremely faint, illegible handwriting. The text appears to be a continuous narrative or a series of observations, but the characters are too light to transcribe accurately. There are approximately 15 lines of text visible across the page.

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2nd The paroxysm of Hectic Fever is often ^{not} preceded by a chill, and frequently severe rigors are experienced without any hot or sweating stage -

3rd The paroxysm of Hectic is not relieved by perspiration, as chills & flushings continue though the discharge by the skin may be copious -

4th The paroxysm of Hectic in the hot stage is attended with a circumscribed spot (or flush) on the cheeks -

5th The tongue in Hectic Fever is clean, florid and sometimes preternaturally red, while in Intermittents it is uniformly loaded with fur, either white or of a buff color -

6th The appetite and powers of digestion continue for the most part unimpaired in Hectic Fever, and the bowels are in their natural condition - but in Intermittents there is generally gastric uneasiness, loss of appetite and constipation of the bowels -

7th The urine in Hectic Fever is turbid during the paroxysm, & pellucid as water during the intervals, whereas directly the reverse happens in Intermittents -

8th The mind of the patient in Hectic Fever is proverbially cheerful, while in Intermittents there is a good deal of irritation

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anxiety & distress, with depression of mind. 289

It would be easy to point out other circumstances in which the two diseases differ - but those which I have mentioned are the most prominent & sufficient to form an accurate diagnosis -

As regards the management of Ecthic Fever it does not less resemble Intermittents both in general principles & in particular remedies - The treatment divides itself into 2 parts - that which is calculated to prevent the paroxysm, & that which is suited to the intermission or apyrexia - Of the means of prevention Opium is confessedly the most efficacious - The concurrent testimony of a large number of practitioners is in its favour - But on account of the great & increasing delirium in Ecthic Fever we do not follow it up with warm leeches & other means calculated to produce perspiration - On the same account we should withhold those means in the subsequent part of the paroxysm, & should permit the hot & sweating stage to pass off with little active treatment - But in the absence of the paroxysm we pursue a different course - we here employ all those remedies which are resorted to in Intermittents, but among these

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There is a choice, & I shall detail those 291
only as have strong claims to our attention ~

Ectic Fever is either Inflammatory or other-
-wise - When there is too much action as is apt
to be the case in the early stage, the system
should always be reduced before tonics are
administered. Most generally $\frac{1}{2}$ is indicated
and the blood when drawn under such circum-
-stances always presents the appearance of inf-
-lamination - Now will a single bleeding answer
- on the contrary in most instances the operation
should be frequently repeated, though moderate
quantities of blood should be drawn at once
5 or 6 $\frac{1}{2}$ at a time - The alimentary canal not
being oppressed with accumulations of bile nor
in any respect implicated in Ectic Fever, evac-
-uations from it are not particularly demanded
But I cannot help being influenced by my own
observations that in some cases Emetics may be
given with utility - They do not operate as evac-
-uants, but on a principle which has hitherto
been fully explained - It may be advanced
as a rule to which there is probably not a solis-
-tary exception, that all diseases of a periodical
nature, or which observe the paroxysmal type
are especially benefitted by this class of med-
-icines, or in other words by repeated & active vomiting.

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The system of the patient being now 293
 relieved by antiphlogistic measures, we may
 safely resort to tonics - of these not the least
 celebrated is the Peruvian Bark - It was the
 favorite remedy of Dr Cullen who speaks of
 its efficacy in the hectic fever of Pulmonary
 Consumption without reserve - But though
 supported by his authority & that of many other
 respectable practitioners, yet I confess my con-
 fidence in Peruvian Bark is not very high -

Generally in my hands it has proved offensive
 to the stomach - often ran off by the bowels &
 scarcely ever suspended the paroxysm - But
 I may have failed from circumstances of which
 I was not aware, & on my report alone I would
 not wish that the remedy should fall entirely
 into discredit - Some have found it beneficial
 to combine Bark with Myrrh, but my own ex-
 perience teaches me that myrrh will answer best
 when exhibited alone or differently combined - A
 celebrated prescription much employed in Hectic
 fever & especially when it accompanies Pulmonary
 Consumption is the following -

Griffiths Hectic mixture	{	Myrrh Pulv -	ʒij	} mix
		Sulphate of Iron -	ʒj	
		Carbonate Potash -	ʒj	
		Loaf sugar -	ʒij	
		pebble -	ʒv	

Dose a table spoon full every 2, 3 or 4 hours.

[Faint, illegible handwritten text, likely bleed-through from the reverse side of the page.]

[Faint, illegible handwritten text visible along the right edge of the page.]

Many of the vegetable bitters, as Commomile 295
Quassia, Gentian, Calumbæ, are better suited to this
disease than the Peruvian Bark - Serpentina
and wild Cherry tree Barks however are more good
than any other of this class - The wild cherry tree
bark is a most valuable remedy in Hectic Fever
- it operates as a tonic & by quieting irritability
- from it much benefit may be derived - To the
large body of evidence in its favour may be added
that derives from my own practice, & from

9 the practice of my medical friends -

Within the last 3 or 4 years the Muc Muci has
been much employed in this disease - It was
originally introduced by Dr Barne a physician
of Oxford in England - It has been tried in this
City and not without utility - The few trials I
have made with it have induced me to think
favorably of the medicine -

It may be supposed that Arsenic which is so
valuable a remedy in Intermittent Fevers has
not been neglected in the disease which now
occupies our attention - It has been largely
prescribed, and if we credit the attestations
of respectable physicians, with considerable
advantage - My own experience enables me
to speak in no high terms relative to Arsenic
It has not been much employed by me

The manuscript on this page is extremely faded and illegible. It appears to be a single paragraph of text, possibly a letter or a journal entry, written in a cursive hand. The ink is very light, and the paper shows signs of age and wear.

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- but in the few trials I have made of 297
it I have been disappointed -

Of late the Sacchi Saturni has been not a
little recommended in Hectic Fever. It is
spoken of by Dr Ervine of Charlestown in the
highest terms. Encouraged by my respect for
his opinion I have recently used it in several
cases of Hectic Fever, but have not yet derived
any advantage from it - D

During my residence in Europe the Mineral
acids were much employed in this disease,
of their utility there can be no doubt. The
Nitric acid is uncontestedly the best. It has been
frequently used by me, and I have always had
reason to be satisfied of its usefulness. Combined
with the liberal use of Opium, it is certainly
the most efficacious remedy that can be adm-
-inistered in Hectic Fever. My mode is to give
as much Nitric acid as can be conveniently
taken during the day, & every night at bed time
to prescribe a large dose of Opium, & another
anterior to the paroxysm -

As Hectic Fever is a disease purely of irritation,
it might be conjectured that Opium would be
serviceable, and practice fully confirms the supposition.
But though the method mentioned above is per-
haps the best, yet there is a remedy remaining

• White wine vinegar is prescribed by
doctors of the College of Physicians in London.

of too great importance to be overlooked. 299

I formerly mentioned the power of Sulphur over all diseases of the paroxysmal type. It is the opinion more particularly of Dr. Physics that it affords perhaps the best means of remedying Plectic Fever. What I have seen does not allow me to go quite so far but I am prepared to pronounce favourable of the medicine. It must be used in doses too small to purge.

During the last summer I tried the Spiders web in several cases with Dr. Physics: its effects are very analogous to Opium - it may be used when Opium cannot be administered.

The last remedy I shall mention is Charcoal - induced by the great efficacy of this article in Intermittent Fevers I have lately tried it in a case of Plectic Fever, and the success was such as to inspire me with confidence in the remedy.

Little known will all these medicines accomplish unless the patient is placed in a large & perfectly ventilated apartment. It is not easy to conceive by those who have not experienced the effects of free ventilation, how important it is to attend to this circumstance. I have known an incipient Plectic fever removed by placing the patient

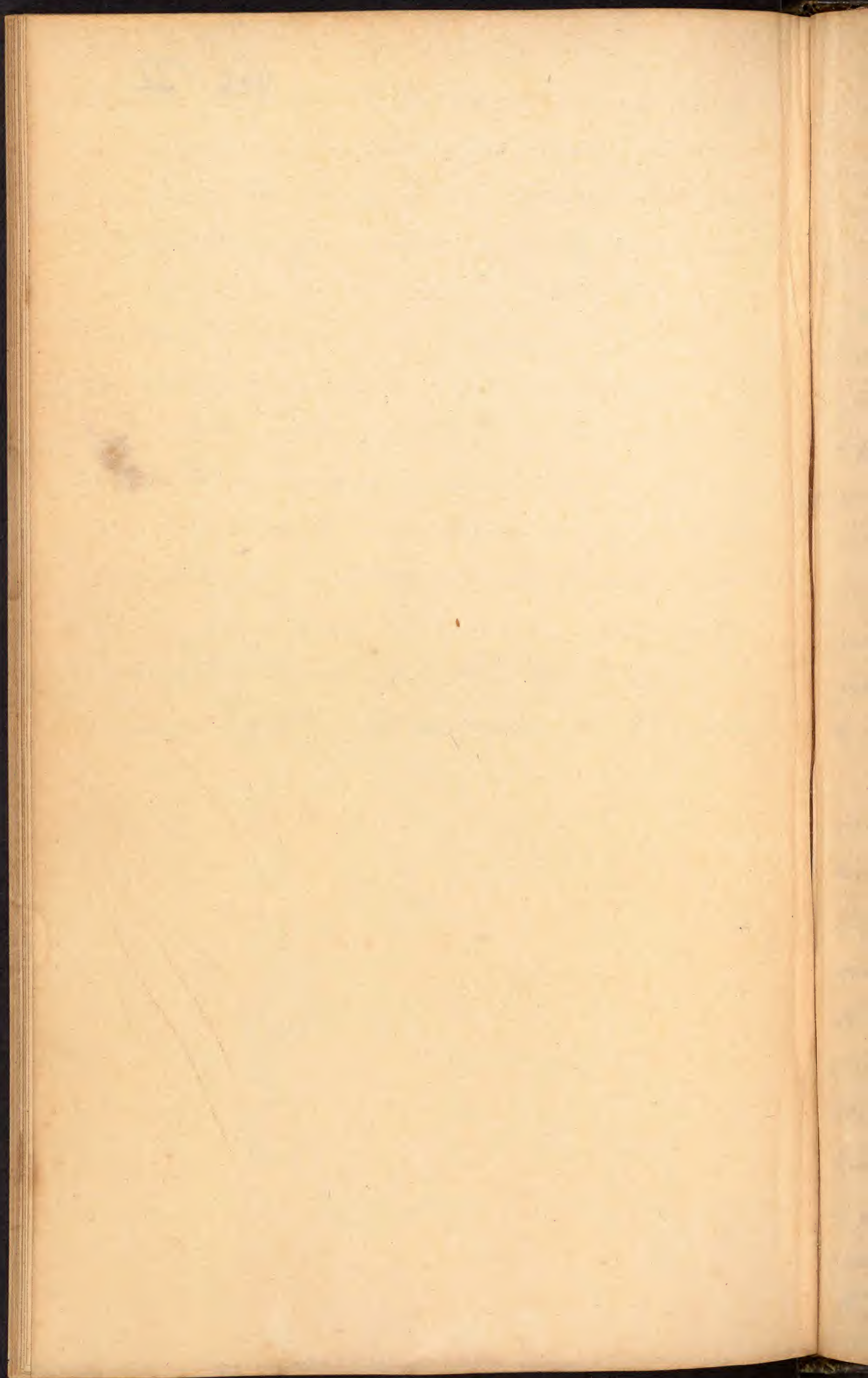
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in a room where the air freely circulates. 361

Exercise is very important & riding on horse back should be preferred. But when riding on horseback cannot be borne by the patient riding in a carriage should be substituted.

As stated such is the management of Electric Fever excited by causes which the Surgeon cannot remove - but where the source of irritation may be entirely done away by an operation, or partially removed by those local applications which have a tendency to calm it, these should be resorted to. - Such cases however come under the province of Surgery, and to the Professor of that branch I design the management of them.

Vol II



Dr. Thompson

My dear Sir,
I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the matter of the
estate of the late John Thompson, deceased. I have also the honor to acknowledge the receipt of your letter of the 11th inst. in relation to the same matter.
I have the honor to acknowledge the receipt of your letter of the 12th inst. in relation to the same matter.
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On Hemorrhages

We next proceed to the treatment of Hemorrhages - These have been divided by Stahl & Cullen &c. into Active & Passive, but they are difficult of distinction - They are also divided into Accidental, vicarious & critical..

The first is foreign to our purpose more properly belonging to Surgery - The second occurs often, though seldom dangerous, unless from the Lungs, brain, &c. The 3^d is analogous to the last -

Active Hemorrhage has been defined, Dyrexia with effusion of blood, attended by inflammation being preceded by a sense of fullness, swelling & itching of the part - It is sometimes attended with Intermittent symptoms of a local nature the hemorrhage taking place during the hot stage - Hemorrhage is most frequent about the age of Puberty when growth ceases, & the blood accumulates - When the hemorrhage is from the Liver, Spleen, Stomach, & Hemorrhoidal tumors, it is almost always venous, When from the Lungs, nostrils, &c it is arterial -

Book of Remembrance

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Its causes may be considered,

1st The changes which take place about the age of Puberty -

2nd Local malformations, as short neck, narrow chest &c -

3rd active Hemorrhage occurs from full habits particularly in the Spring, but sometimes in reduced habits from congestion -

To these may be added others which are accidental viz:

4th Such as invigorate the circulation, as exercise in running, leaping, lifting heavy weights &c, & strong venereal appetite when restrained -

5th The dilatation of the blood vessels from heat - This is perhaps not true, but high temperatures, dispose to hemorrhages, as in stove rooms &c -

6th Colds suddenly applied to the feet, or surface - Here the blood is thrown to internal parts -

7th Diminished weight of the atmosphere - this fact is proved by de Saussure & Baron Humboldt, on the Alps & Andes, where the blood gushes from their nose, ears, Gums, &c on the slightest exertion - These causes may be further aided by position & other like causes interrupting the circulation,

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When they arise from blows, wounds, falls
&c, they belong to surgery -

In the cure of Hemorrhage the first thing
that engages our attention is the long agitated
question - "Is it expedient & proper to interfere
with nature in her operations"? Stahl and
his followers answered this in the negative.
It is true that nature often provides for her
own safety, as when syncope comes on to check
hemorrhage. But on the other hand it is some-
times necessary to take the business out of her
hands to save life - In many cases however
it is highly dangerous to interrupt her, thus
the stopping of Hemorrhoids, where there is a
predisposition to mania, apoplexy &c is at-
tended with the utmost danger - In critical
fluxes also, great caution is requisite -

But nature wise & salutary in most of her
operations is not always so, as when she pours
blood into the Lungs instead of the hemorrhoi-
dal tumors, when she carries the evacuations
too far, or when she opens a vessel larger than
she can command - In these cases art must
assume the prerogative -

As preliminary to the treatment of hemor-
rhage I shall point out the general indica-
tions, with some observations of a general kind.

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1st The leading indication in hemorrhage
is to suppress the flow of blood - this if active
or attended by febrile action is accomplished.

1st By reducing the quantity of circulating flu-
ids in the vessels -

2nd By refrigerants both external & internal
as cold applications & neutral salts -

3rd By sedatives, or such articles as reduce the
force of the circulation, as Digitalis, Squills,
Talcum &c -

4th By astringents applied to the part, or
given internally, as sugar of Lead. Mineral
acids & vegetable astringents are of this kind.

5th By revulsing the circulation to less impor-
-tant parts. This is done by Stimulants re-
-mains applied, as synapisms, pediluvium
&c. but the best is Blister applied near the
bleeding vessels -

The 2nd Indication is to remove the cause
which operates. As it is generally produced
on plethora, the best prophylactic is a spare
vegetable diet - Most other means do violence
to the system, as repeated venesection, purging &c.
These useful emergencies are all injurious by
long habit - Exercise is a useful auxiliary
promoting secretion, excretion &c. and estab-
-lishing an equilibrium of action favourable

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to health - These are the leading precautions & rules to be observed in the treatment of hemorrhages -

Hemoptesis or

Hemorrhage from the Lungs

I now proceed to the consideration of particular hemorrhages, & first of Hemoptesis or Spitting of bloods - This is a hemorrhage of the Lungs, trachea or fauces, when from the two latter parts it is thrown up by a kind of hawking without cough or pain & structure of the breast, but often attended with inflammation of the throat & fauces, these are generally of little importance, but are sometimes serious in their nature - They are sometimes the precursors of consumption, and indicate a continuance of the disease. They occur in the catarrhal and sometimes in the tubercular forms of this disease -

In genuine cases of hemorrhage from the Lungs, the blood is fluid & frothy being attended with cough, pain in the breast, &c. But the more general causes are malconformation, as a narrow thorax, prominent shoulders and slender make - also loud & long continued speaking or singing, excessive

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laughing, violent rage, severe exercise
in lifting weights, change of weather, irregu-
lar habits, suppression of hemorrhoids
or menstrual fluxes &c.

It is a singular fact that this occurs much
the most frequent during the night time.

The danger of this disease differs as the na-
-ture & degree of the hemorrhage varies -

1st When from accidental rupture of a vessel,
as from falls, blows &c. it depends on the
size of such vessels -

2nd When from acute inflammation of the
Lungs it is not highly dangerous, unless
excessive in quantity -

3rd When from Metastasis, as from suppressed
hemorrhoids, or catamenia, it is seldom very
dangerous, unless from large vessels -

4th When from Plethora of the Lungs, a
periodical evacuation is produced, no great
danger is to be apprehended. Numerous
are the instances in which such persons
have attained the greatest age -

5th When from abscesses following the inf-
-lamination of the Lungs, it frequently with
care terminates favorably -

6th When from tubercles in the Lungs of scrofulous
persons, perhaps it always terminates in Phthisis Pulm^o.

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But we are to treat of that form which is attended with febrile action. The symptoms which denote it, are pain & tension of the thorax, with a sense of heat and weight under the sternum, full pulse flushed countenance - preceded by chills, coldness of the extremities, pain in the back, loins, & head, flatulency & constipation.

Treatment

The first indication must be to reduce arterial action. & resection is the proper means. But Dr. Hecleston asks how the opening of a vein can possibly check the flow of blood from a vessel in the Lungs - a sophism unworthy so great a man. It involves no dark enigma. It acts on the principle of revulsion, by inviting the determination from the Lungs - Large bleedings are always to be preferred to small ones. My practice in alarming cases is to take blood until the symptoms are relieved. At the same time Murriate of Soda is to be given in doses of a spoon full, every 10 or 15 minutes if necessary - This is a remedy of decided efficacy - Powerfully astringent, it seems to act on the fœces, & thence extends its action to the Bronchial vessels,

15

If critical cold applications to the Thorax, & particularly in the axilla is of great advantage - Some recommend to wrap the whole body in a sheet, wet with cold vinegar & water - Ice has also been applied externally - Dr Bond of this City employed this cold practice, but it seems too unwholesome - Dr Darwin advises the dashing of cold water (on the back) and the cold bath. There is great danger of augmenting the disease by such means, by throwing the blood on internal parts -

The Sacchi Saturni was long used, but Sir George Baker about 30 years ago announced the poisonous nature of lead, & for a time deprived the profession of its aid. But to the illustrious & much lamented Dr Barton, is the merit due, of having again dissipated these errors from our profession & restoring it again to use, where it is now too indiscriminately used - Copious depletion should be carried as far as the system will bear before the Lead is given, & then it may be prescribed in the dose of 2 or 3 grs combined with Opium as may be proper -

It is chiefly useful in slow habitual hemorrhages from small vessels, in large

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ones it can have but little effect.

Given in large doses it would probably have a good effect. I once gave a \mathfrak{zj} without any bad effect resulting. & I once saw a \mathfrak{zj} given with the single effect of purging.

Much confidence has been placed in Allium but I do not believe it is proper, except in the late stage to prevent a relapse.

What shall I say of Digitalis? From its influence on the circulation, it has long been used in this disease, but it is never to be trusted too without previous venesection. In small doses it operates too slowly, in large doses it vomits. Emetics were highly extolled by Dr Bryan Robinson of London, but Cullen on trial found them ~~useless~~ and worthless. Vomiting sometimes proves useful as when spontaneous, & I once saw it beneficial from a large dose of Digitalis. They are generally hazardous in severe cases but they are useful in chronic forms with tubercles. They divert the blood from the Lungs - equalize the circulation & remove the stricture of the cutaneous vessels.

My experience satisfies me that vomiting spontaneously produced sometimes proves highly beneficial, but I condemn them in common.

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Emetics given in nauseating doses
prove very beneficial. They may all be given
but decidedly the best of them is Emet. Tart.
This proves very beneficial, especially in
febrile hemorrhagy.

We have the testimony of Mosely & Bartons
in favour of the Nutriolic Solution - as far
the preparations I cannot say much of it
from my own experience - But as for
Spessacantha I can strongly recommend
it to you, after a number of years using it
and the more I use it the more I become
attached to it, given in nauseating doses.
The best mode of giving it is in combina-
-tion with opium. *Rx Spessaci ʒss*

Opium grs

every 2 hours, so as to keep up the nau-
-sea for 24 hours -

The Refrigerants I have spoken of
before, among these the Neutral Salts are
placed. The Nitre is the best though
this is sometimes injudiciously press-
-rised; we should use it while the blood
is copiously flowing, & as an auxiliary
to the Lanch. -

The Antimonial Powders of Dr Rush
given in the common manner is of the greatest
utility. -

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Next to the last mentioned medicine 21
the mineral acids & vegetable astringents
may be used. They may be used in the first
stages of the disease although we must not
trust wholly to their use. Of these the best
is the Sulphuric Acid, dose xx vel xx drops
every half hour or hour. The Nitric Acid
may be added to this.

Next the Narcotics become necessary. Of
the Digitalis I have already spoken. The Cic-
-uta, Hemlock, Henbane & Opium have been
used in this disease. The practice origina-
-ted in Germany, & was followed by the English
practitioners. Hemlock in my practice pro-
-mises not much, but Opium is very use-
-ful after Hemlock. Some say to stimu-
-late is hurtful, but look at the surgeon
who gives it after an amputation to relieve
pain & irritation & to stop hemorrhages.

It acts as a stimulant but it may be safely
employed when there is much pain, and it
is in such cases that I use it in Hemoptesis
when there is much pain & cough. Although
the arterial action is excited, yet there is no
doubt but that the excitement is kept up
by the irritation in many cases.

23

I next come to speak of some local remedies. Of cold water I have already spoken. After using the remedies already mentioned, & we find the hemorrhage still continuing, or a predisposition to its return we must resort to blisters. Practitioners differ with respect to the place of applying these remedies, some prefer the wrists and ankles; some the back of the neck & chest.

A majority of them are in favour of the latter practice, & I think it far preferable owing to the proximity to the disease. There is but one exception to this rule, & that is when we wish to produce a revulsion, when we should apply them to the ankles and wrists. Too much cannot be said in favour of the utility of blisters.

But other means now become necessary

- 1st We must again complete rest in bed and the shoulders kept erect.

- 2nd The chamber must be kept cool and well ventilated.

- 3^d Company must be excluded, & no conversation must be introduced.

- 4th The diet should consist of demulcent drinks & light food, the stomach must not be overloaded either with drink or food.

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5th The vessels must be kept in a soluble state, though active purging does no good. Passive or feeble hemorrhage whether original, or produced by previous evacuations, require the same treatment. Evacuations are to be excluded. Tonics then become necessary and among the best is the Peruvian Bark. It has been held in high repute by the much lamented Dr. Rush, given alone; but I think when it is combined with the chalybeates it becomes much improved.

Next is the vegetable astringents. Kino has been highly extolled, but from my own experience I can say but little of it. I think here the mineral acids are the best, especially the Sulphuric & Nitric. If the disease is accompanied with tubercles, or calls for an immediate stoppage, I think the Nitric acid is to be preferred.

These are the principal remedies to be used in the treatment of this disease, but it becomes necessary to take exercise to invigorate the system.

Of Drinks the best to be used is Porter. This alone has cured many cases under my observation.

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When Hemorrhage is united with constitutional affections, or is likely to recur again, we must resort to Prophylactics.

1st Avoid all causes which produce a preternatural impetus of the blood - prescribe milk, & gentle exercise -

2nd Avoid taking cold as this will have a tendency to reproduce the hemorrhage -

3rd When there is a predisposition to a recurrence of the disease, we should watch the pulse & case - and occasionally prescribe venesection - rest - low diet, cooling drinks - in fact we should follow the whole antiphlogistic plan -

4th Blisters to the chest, when there is local pains, otherwise to the wrists & ankles -

5th Salivation proves beneficial by substituting its own disease in place of the former -

6th Emetics are useful, especially when it is connected with Tubercles, they relieve the cough & oppression, & leave to nature and cure all the final cure of the disease -

Sometimes it is so troublesome that it will combat all our remedies, & then our dernier resort is to send our patient to a warmer climate, especially by sea

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But will often fail, but never unless
then effects a cure -

It is a rule of our professional conduct
that precisely as we are embarrassed in
the cure of a disease, so is our diligence
to be increased, & leaving nothing undone
whilst there remains any thing to be done;

Hæmatemesis

or

Vomiting of Blood

I pass from the consideration of Hemoptesis
to another form of hemorrhage, denominated
Hæmatemesis, or a discharge of blood from
the stomach. This has been sometimes
confounded with Hemoptesis: but it is
necessary they should be distinguished, &
there is no great difficulty in the case - It
is to be recollected that hemorrhage from
the stomach is neither preceded nor atten-
-ded with any pulmonary affection, as cough
disordered, pain & oppression - The blood is
uniformly dark, grumous, generally mingled
with the contents of the stomach, & is brought
up by vomiting. But in hemorrhage from
the Lungs, in addition to the symptoms

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already mentioned as distinguishing it
the blood is of a lively, florid, arterial co-
-lour, mixed with frothy mucus, & is
raised by coughs or expectorations —

Many causes may produce Hemate-
-mesis - It is now & then the result of all
those circumstances which occasion the
other diseases of this class - most usually
it is caused by contusions, blows, local
injuries, hard drinking, the operation
of violent emetics, passion introduced
into the stomach, or the swallowing of
cold substances, as very cold water or ice
creams. This is one form of the disease
& may be considered as primary or Idiopa-
-thic Hematemesis - But as frequently
or even more so, we meet with hemor-
-rhage from the stomach of a secondary or
vicarious nature, arising from obstruction
of the Liver or Spleen, or from suppression
of the hemorrhoidal or catamenial discharge.
- In the treatment of the case before us
we must be governed according to circum-
-stances - If there is regain of the pulse, &
other marks of inflammation, we are to
employ bleeding, & in every respect the course
of practice recommended in the other cases,

white nitrate & Sulphur

Sp. Turpentine should not be applied when
there is a phlogosis of the stomach -

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To suppress the hemorrhage, when
profuse, common salt, alluin, & Sugar of
Lead in solution may be directed. or what
will answer very well, the tincture of Iron
in doses of 20 or 30 drops. As these come in con-
-tact with the mouth of the bleeding vessels,
they act more promptly than in the other
species of hemorrhage - Cold drinks, particu-
-larly ice water have been recommended;
but how far they are serviceable or even
prudent my own experience does not allow
me to state positively. - Connected with
this disease, there is extreme irritability of
the stomach, & sometimes so much vomit-
-ing that no prescription can be retained.
The first object then, is to allay this com-
-motion of the stomach, & for this purpose
we should employ the ordinary means, espe-
-cially Blisters over the Epigastric region -
These answer a two fold purpose, they check
the vomiting, & often also suppress the hem-
-orrhage -

under these circumstances
By some practitioners it is advised, to
resort to the Rectum as the medium through
which to apply our remedies - cases no
doubt might occur where it would be
right to do so; though I never met with

I have given when nothing else can effect
a cure when the patient lies prostrate, cold
clammy sweat, respiration difficult, pulse very
feeble, give 30, 20, or 25 grs of it and you
will often effect a complete cure.

after vomiting mild purgatives should always be
given and never omitted which too often done -

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an instance in which any strong necessity of this kind exists --

The hemorrhage being thus suppressed we are next to inquire whether the cause depends on visceral obstruction, or the suppression of some one of the accustomed evacuations: Either the one or the other being ascertained, we must proceed to treat it accordingly -- The management is too obvious to be particularly indicated, consisting in the employment of remedies with which you are perfectly conversant --

As intimately connected with the subject before us, I shall say a few words on a species of Hematemesis which often occurs in females about the age of puberty, which is said ^{by Dr Hamilton} to be successfully managed by the employment of purges -- It has long been held that these discharges are vicarious to the menses & I am inclined to the opinion -- My reasons for the belief among many others, is, that in all cases of the complaint I have ever seen, it was associated either with Retention or Suppression, But it is now contended by Hamilton of Edinburgh, that the form of Hematemesis alluded to, proceeds from or mainly depends on an obstinately constipated state of the bowels --

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The faces brought away are, according to him always exceedingly copious, of an unnatural colour, consistence & smell. What is the success of this plan of treatment, compared with the more common remedies, I will not take on myself positively to decide - Of this you may be assured, that in Chlorosis at least, with which the hemorrhage under notice is often associated, purging constitutes incomparably the most effectual mode of management -

Epistaxis

or

Bleeding from the Nose.

This species of hemorrhage is exceedingly liable to occur about the age of Puberty. After menoturation appears in girls, a new train of action is established and Epistaxis is rarely met with - All the causes of the other kind of hemorrhage are productive of this, though some act more immediately, as exposure to heat, violent exercise, blows on the nose, particular postures of the body (as with the head hanging down), and tight ligatures about the neck. These circumstances acting on a disposition congenital or acquired, occasion

the first thing I saw on entering
the room was a large table
covered with a white cloth
and on it were several
bottles of wine and
a large bowl of fruit
The room was very
large and airy
and the windows
were open to the
garden

Chapter 1

THE FIRST OF JANUARY 1800

It was a fine day
and the sun was
shining brightly
The wind was
fresh and cool
and the birds
were singing
The children
were playing
in the garden
and the dogs
were running
about

bleeding from the nostrils —

Sometimes it comes on without any premonitory signs whatever; but when associated with constitutional plethora it is most frequently preceded by indications of a determination to the head: as pain in the head, vertigo, tinnitus aurium, a flushed tumid countenance, heat & itching of the nostrils, and in some cases, a constant throbbing of the temporal ~~arteries~~ carotid arteries — Now and then the disease puts on a more distinct febrile character, and in this case previous to the attack there is a cold fit rigors & flushings alternately, & a constipated state of the bowels —

The indication in the first place is to check the flow of blood when inordinate and secondly to do away the tendency to a recurrence, when this would be troublesome or dangerous — To accomplish the first indication a great variety of means have been used, we are first to place the patient in a cool situation, either in an erect or sitting posture, with his head a little inclined backwards — Cold applications are next to be made to the nostrils or back part of the neck, or

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which is an excellent place for the purpose, to the scrotum. This last part possesses great sensibility to cold, & when such applications are made to it, they have a great effect in the suppression of every form of hemorrhage, particularly that from the nose. We often meet with cases which resist the ordinary measures, and which yield at once if the scrotum be enveloped in a cloth wrung out of very cold water. The means I have mentioned proving inefficient, the nostrils should be plugged up with a deposit of lint either dry, or wet with a strong solution of calum, sugar of lead, white vitriol, the sulphate or muric acid of Iron; or what I have seen again & again answered, wet with water & then disposed into powdered charcoal. If these prove unavailing it will be proper, as in the other cases of hemorrhage to detract blood from the arm, provided the pulse call for depletion. It will also be proper to immerse the head under water, made intensely cold by Sol: ammoniac, or common salt. This plan often proves effectual when other measures fail.

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As a dernier resort, when the hemorrhage is so copious as to threaten danger you must resort to compression of the bleeding vessels; for this purpose a thread should be conducted by a probe through the posterior nares & a piece of sponge attached to the end of it, should be drawn into the nostrils ~

To obviate a return of the hemorrhage the patient must steadily avoid all exciting causes ~ Most commonly Epistaxis is associated with a full ~~state~~ action of the vessels, & then the whole antiphlogistic plan must be carried into operation - The diet should be very low & all heating & stimulating drinks should be forbidden - As relates to the medical treatment more particularly venesection may be used when the circulation is active, & there is great determination to the head - Topical bleeding by Leeches, & cups is highly important ~

To do away the predisposition to hemorrhage from the nose, I have much confidence in purges - These are salutary in all affections of the head, on a principle which you will understand, & they

As a general result, under the

operation of the system, the
most important result is the
reduction of the number of
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are particularly indicated in ~~these cases~~ ⁴⁵
~~these~~ the habit of constipation which un-
-iversally prevails - All these ~~have~~ ^{have} ~~been~~ ^{been}
-ving inefficient apply a Blister, either to
the extremities, or the back of the Neck,
or establish some other artificial drain, &
you will I believe obtain uniform suc-
-cess -

But here the question again arises, are
we warranted in removing a hemorrhage
so often critical, & of a salutary tendency.
Having already spoken at considerable length
on this point I shall not again go over
the same grounds - It must occur to every
practitioner, that in certain cases which
arise from ardent fever, & great determina-
-tion to the head, it is extremely indis-
-creet to interfere with the effort of
nature, unless the discharge proceed so
far as to occasion extreme debility - Nor is it
prudent to suppress the hemorrhage in
persons of full plethoric habits, with an
apoplectic or other alarming tendency -
The proper course in these cases is, gra-
-dually to do away the disposition to Epis-
-taxis, by pursuing those measures which
have been already mentioned, and

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the other hundred of which is in the field

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especially by instituting a mercurial
discharge, by means of Blisters or Issues, on
the extremities or nape of the Neck.

Menorrhagia

or Uterine Hemorrhage

We next proceed to uterine hemorrhage
or what some have called Menorrhagia.

Menstruation is one of the most important
functions of the female sex, & subject to de-
rangement in several ways, each of which
has considerable influence over the health
& comfort of women. Not the least im-
-portant of these derangements is menorrhagia,
which as the term implies, is an immoderate
flow of the menstrual fluid.

This may be constituted either by an excess
of the discharge, by its continuing too long
at a time, or by its occurring more frequen-
-tly than natural. Most women are liable
to irregularities in these respects, which are
not always to be considered as diseases, &
we are to view in this light, only such
wide deviations from nature, as are mani-
-festly attended with pain, debility and
sickness.

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In a previous lecture I attempted to show that the menses are not blood, as was formerly supposed, but a peculiar fluid resulting from a genuine secretory office of the uterus. Now is it true that all periodical discharges from the uterus are of the nature of the catamenial flux, my own practice leads me to a directly contrary conclusion. After ample opportunities, I can assert that in every case which has come under my observation of profuse uterine discharge, I have found the fluid to be pour-
coagulable blood.

Menorrhagia, properly so called is comparatively of rare occurrence; & even when it does present itself, seldom requires any medical treatment. Being a natural secretion it runs on to its usual termination, whatever may be done to interrupt it, unless we resort to rash & violent measures, which if successful would be followed by all those consequences which result from suppressed secretion.

The only remedies that are required, are rest, a cool ventilated room, horizontal posture, Acid drinks as Cream of Tartar given so as to open the vessels, & occasionally if pain & irritation exist an anodyne is demanded,

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But in the intervals of menstruation I endeavour by various means, to make such an impression on the uterus as may restore its healthy condition. But more of this hereafter when I shall come to the treatment of the diseases of the generative system. It may be collected from the views I have presented of the uterine discharge, that I consider all those cases which call for speedy medical assistance, as hemorrhagies of blood & merely the result of accident. They may take place either in an impregnated or unimpregnated state of the uterus, & may precede or immediately follow delivery. These cases however interesting they may be, it is not my province to consider, they belong to the Professor of Midwifery & to him I refer you. I shall only remark, that whenever an alarming flooding occurs prior to delivery, the child is as promptly as possible to be removed, in order that the uterus may be allowed to contract on the bleeding vessels, & thus close their orifices. No medicine or any other means except delivery is of the slightest consequence.

It is my duty only to treat of those periodical hemorrhagies, hitherto considered

as an increase of the menstrual dis-
 -charge, & hence denominated Menorrhagia.
 These are sometimes exceedingly copious, &
 demand the closest attention, & the most
 powerfull measures for their relief. +
 They may be associated with a highly ex-
 -cited inflammatory condition of the system
 or with a low & exhausted state. When
 they are accompanied by head-ache, giddiness,
 23 dyspnea, pains in the loins, & a full, strong,
 chorded pulse there should not be the high-
 est hesitation in resorting to the directly
 depleting remedies. The case is to be treated
 on the principles applicable to hemorrhagies in
 general. To subdue the force of arterial action
 is the leading indication, & to accomplish
 this, the lancet freely employed is indispen-
 -sably necessary. Co-operating to the same
 ends, the bowels should be opened by mild
 saline laxatives, & a state of repose with the
 whole antiphlogistic plan must be observed
 with the most rigid scrupulosity. After these
 certain astringents may be employed with
 great advantage. Nothing however is bet-
 -ter established in the practice of physic, than
 that these articles should be preceded by
 copiousunction, when much activity

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of the pulse, or febrile excitement prevails. Nor does the rule apply with greater force to any disease than to Uterine hemorrhage, from whatever cause it may proceed. Let the Lancel be omitted or too sparingly ~~or~~ cautiously employed. & all other means will prove inefficient, & sometimes even mischievous.

At the head of the astringent medicines the Sacch: Saturni stands indisputably. Properly prescribed, it does indeed display extraordinary powers. The European Practitioners concur fully in this sentiment. If ever, says the celebrated Heberden, there was a specific in any disease, it is the Sugar of Lead in Uterine hemorrhage. My own experience does not allow me to go so far in its commendation, though I am prepared to unite with other Physicians in a high eulogium on the article. But to be successful in a copious hemorrhage it must be boldly employed. It is common to recommend its use in the dose of 3 or 3 gr combined with $\frac{1}{2}$ gr of opium every 1, 2 or 3 hours according to circumstances. As well might you treat the case with the same quantity of pure water.

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No good whatever, will result in copious hemorrhages, unless 3 or 6 gr be given, & these repeated every half hour or hour.

I have seen cases treated with the moderate doses mentioned above, & never have I known them prove successful - In more than one instance I have administered 30, 40 or even 50 gr before I could suppress the discharge and never in one solitary instance did any bad consequences result - The more I use the remedy, the more I am persuaded that the old notion with regard to its poisonous nature is entirely erroneous - The only striking effects produced by the sugar of lead, when administered in large doses, are the suppression of the hemorrhage, & some irritation of the bowels such as is occasionally induced by the more acrid & stimulating purges.

It is already known to you that among the remedies for hemorrhage, *Spæcæ* holds a high rank - A great number of respectable practitioners have borne testimony to its efficacy in Hemoptesis: though it is in uterine hemorrhage that it confessedly displays its best powers - In this case it is quite equal to the *Sacch: Saturni*

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and some even prefer it to that
medicine - To do good Specac: must be
given only in nauseating doses, as when
it is urged to vomiting. I am apprehensive
that the consequences are mischievous. I
do not here wish to be understood as say-
ing that vomiting is universally pernicious
in uterine hemorrhage, on the contrary
I have myself known the discharge more
than once completely checked by the occur-
-rence of active vomiting. Whether if it
were excited by emetics it would produce
the same effect, I am unable to say from
personal experience. Natural operations
are sometimes salutary, when similar ones
induced by art are productive of very diff-
-erent consequences. The effect of this med-
-icine seems altogether astonishing in the
suppression of uterine hemorrhage. In more
than one case I have remarked, that the
moment nausea came on the discharge of
blood ceased - By what precise mode of
acting, effects so striking are produced, is
a question by no means easy of solution.
They are not owing to any astringent pro-
-perty of Specac: as is sometimes alleged,
because articles infinitely more astringent

are productive of no such salutary consequences. It is contended by Murray, author of the work Apparatus Medicæ minime that the effects are to be referred all together to the antispasmodic power of the article, and the same hypothesis has been entertained & vindicated by subsequent writers.

But allowing that Specacî is antispasmodic (a point however to which I should concede with great hesitation), its operation is not to be explained on this supposition, since articles unequivocally antispasmodic, have no such effect, & either of these hypothesis are at all satisfactory. Some suppose that the medicine operates merely by the nausea it excites; but were this the case would not the same effect follow the employment of all the nauseating articles, some of which as tobacco, digitalis & squills, possess this power to a great degree, yet are inferior in the treatment of hemorrhage. The fact is, the mode in which Specacî produces its effects, is altogether conjectural, & perhaps not susceptible of explanation. The dose is one or two grains combined with ʒss of opium, & given according to circumstances every 2 or 3 hours or often.

As in Hemoptesis, the mineral acids have also been employed in hemorrhage from the uterus - Most undauntedly in some instances they have the power of suppressing the discharge of blood; but they are comparatively feeble & not to be confided in, when the hemorrhage is copious, & the circumstances alarming. But merely to restrain moderate discharges, some advantage may be derived from them - The best for this purpose is the Sulphuric Acid. It is in general to be administered liberally, 40 or 50 drops every half hour or hour being the proper dose - As might be expected, Alumen has not been overlooked in this disease.

This, indeed was the earliest application of the medicine, & was made by Jan Helmont who tells us that it hardly ever failed to check uterine hemorrhage if freely administered. There can be no doubt of its efficacy, but in modern practice it has given way to the more useful remedies of Sacchi Saturni & Specacuanha - It may be given alone, or in combination with Kino or Catechu - The proper dose is 8 or 10 grs of each - Opium is also sometimes useful in combination with Alumen -

Not a little has been said of the qual.

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of Digitalis in uterine hemorrhage. It
was originally proposed as a remedy in the
active stage of this complaint, as a substitute
for the Lancet, & we find it recommended
by Cullen, Drake, Ferriar, and a number of
other distinguished authors - But there is no
substitute for resection in an active state of
the pulse. As well might you arrest the
~~the~~ rapid current of a mill race, by drop-
ping oil on its surface, as to suppress the
puls stream of blood which sometimes flows
from the uterus, by administering small
doses of Digitalis. Whenever cases of this dis-
ease are accompanied with a great discharge
nothing is so much to be confided in as ble-
eding copiously at the time - nothing else
will suppress the discharge, & if you omit
resection you will place the patient
in the utmost jeopardy. Digitalis operates
on the same principle with the remedies al-
ready enumerated, After arterial action has
been subdued, you may have recourse to
it if the bleeding is not very copious, But
where a large vessel has been ruptured, if
you resort to digitalis you should do so
with great care & circumspection. Determ-
ining from my own observation I should

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say that it has the effect of debilitating
& relaxing the vessels, & thus rather increases
than diminishes the hemorrhage. Most un-
-doubtedly it is inferior in these cases to the
Opoeac, sugar of Lead or mineral acids.

As I intimated before, it is the prac-
-tice in Europe to treat hemorrhages, & espec-
-ially that from the uterus, by the free emplo-
-yment of opium. - It is not my intention
to repeat here, what I have so recently said
of the effect of this medicine - most undou-
-bted testimony may be collected of its efficacy
& under circumstances of almost every descri-
-ption. - But I cannot help thinking, that
practitioners have abused the remedy, by its
too indiscriminate employment. - It appears
to me that in the early stage of every active hem-
-orrhage it must be detrimental. - But
we often meet with this disease, associated
with great pain, irritation & spasm of the
uterus, by which irregular motions the
discharge is promoted, or kept up and con-
-tinued. - It is in this case precisely, that
after bleeding liberally, Opium freely given
is very useful. - The principle on which
it operates is sufficiently intelligible with-
-out further explanation from me.

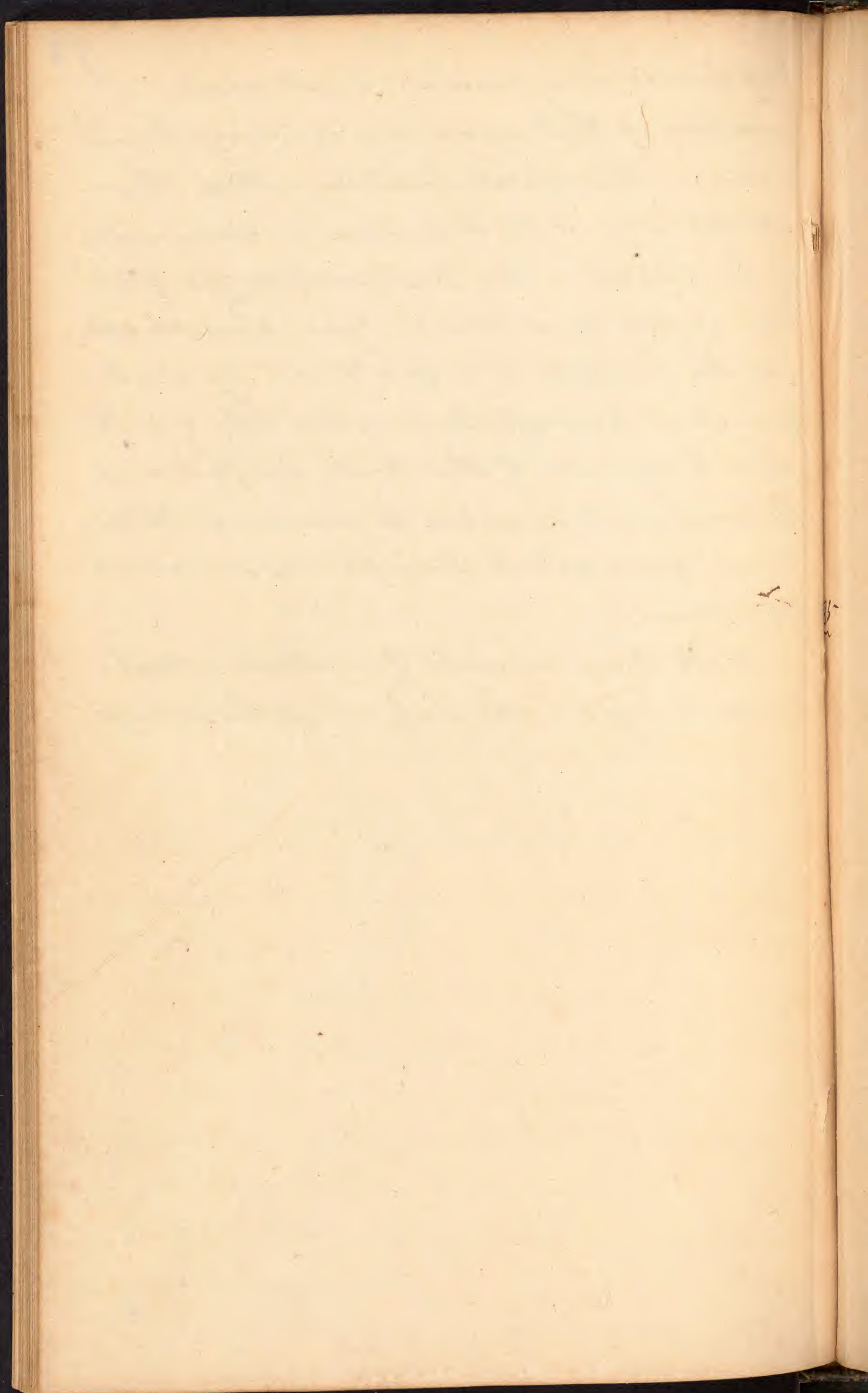
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These are the most prominent remedies 69
which acting through the medium of the general
system, are found to be more efficient in the
treatment of uterine hemorrhage.

In addition to them there are some topical ap-
plications from which great advantage is often de-
rived. The best of them is undoubtedly cold differ-
ently employed. It is the common practice to apply
cloths wrung out of cold vinegar, or intensely
cold water, to the pudendum, or abdomen of
the woman. Also when the circumstances of the
case are very alarming it is not uncommon
to introduce into the vagina a Lump of ice;
or when this is not to be obtained, to plug up
the vagina with cloths wrung out of cold water.
But the best method in which cold can be em-
ployed, where there is profuse hemorrhage, is
to pour the water from a considerable height
in a small stream on the abdomen. The
impression thus made in a large majority of
instances, appears to be productive of great re-
lief to the most prominent symptoms.
Advantages are said to be derived in some of
these cases, by injecting into the vagina, stop-
tic, or astringent lotions, as solutions of alum
sugar of Lead, & white vitriol. I have never
had recourse to this practice, & therefore

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can say nothing of it from my own
experience. But in some cases I have wit-
-nessed great benefit from large quantities
of Laudanum injected into the rectum, & the
however, there existed irritation and spas-
-modic action in the Uterus -

The Hemorrhage of which we have been
treating, though generally associated with an
active & even inflammatory condition of
the blood vessels, is sometimes circumstan-
-ced differently - It is then called Passive
or Atonic Hemorrhage - This is to be treated
on precisely the same principles & with
the same remedies as those which I have
already detailed in a similar form of He-
-moptesis. - But in very old women, &
in some about the period of the cessation
of the Catamenia, we meet with cases of a
different description - Hemorrhage from the
Uterus occurs every 4, 5 or 10 days, in some
instances only moderate, in others exceedingly
copious - It is always a source of great
uneasiness to the woman, & in many cases
is imminently dangerous. Now and then
this periodical discharge occurs merely from
debility & relaxation in the vessels of the
uterus itself, More generally however

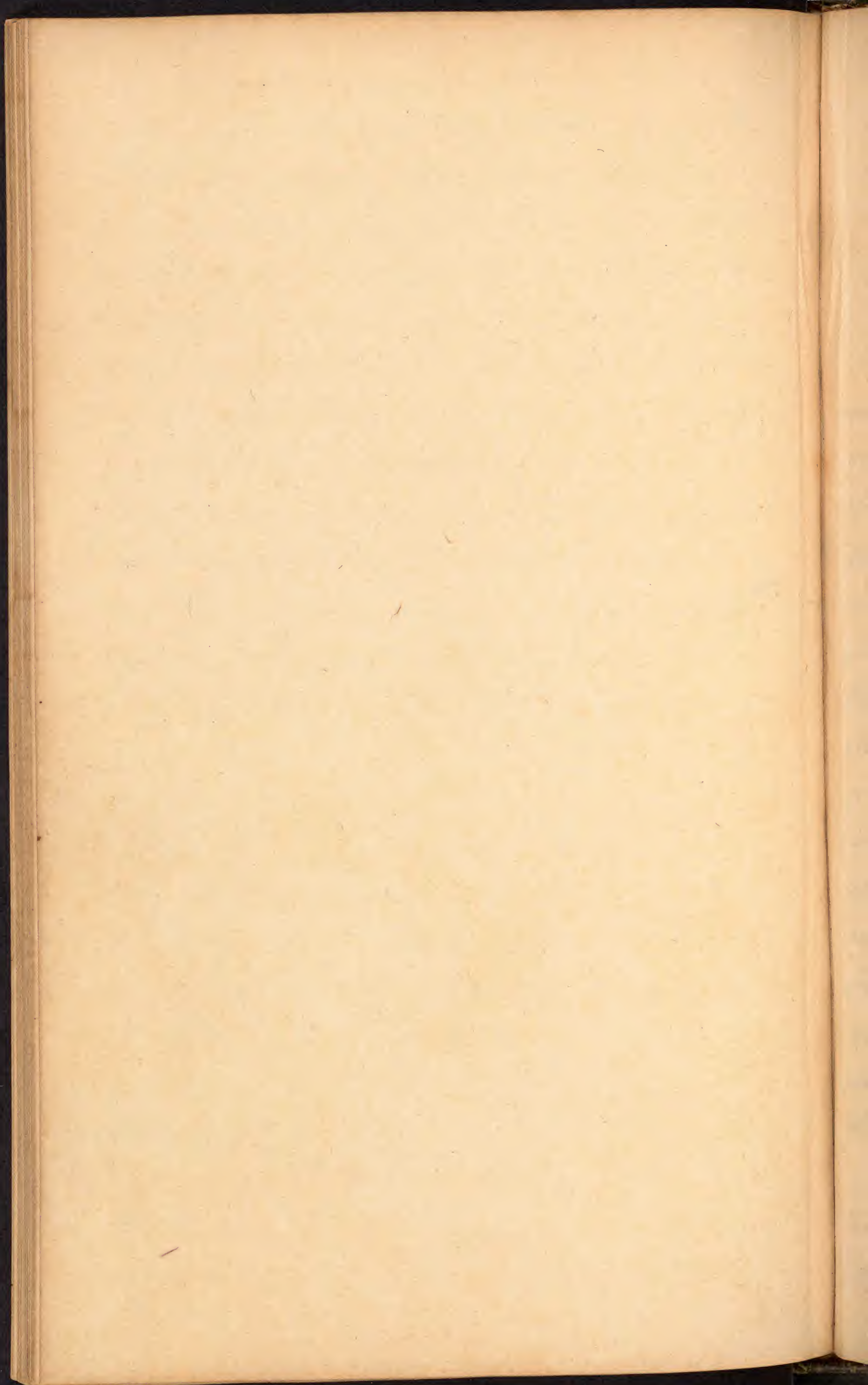


it depends on a cancerous or schirous condition of that organ, or a tendency to such a state - This disease has been called Hemopteres or as Dr Rush termed it, consumption of the Uterus - The treatment differs from that already laid down - You should subject the patient to a low & cooling diet, consisting principally or exclusively of milk.

When a regimen of this kind has failed, it has been recommended to induce a Salivation, from which benefit has sometimes been derived -

With these remarks I conclude what I have to say on the subject of Hemorrhages,

See B.S. notes on Hemopteres & menorrhages



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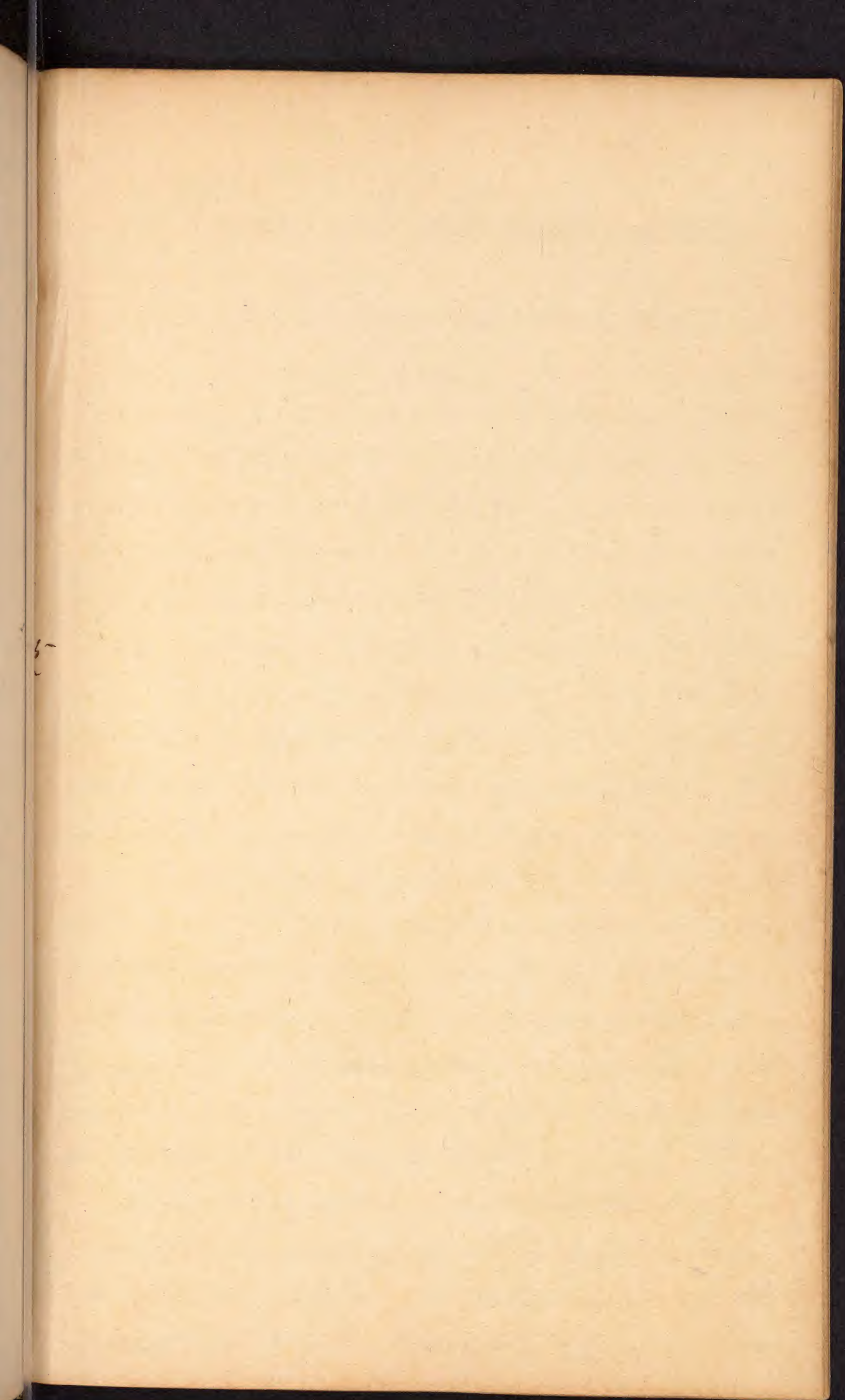
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Diseases of the Respiratory System

Cynanche Trachealis Croup

Today I am to commence with the diseases of the Respiratory system, comprehending the Lungs and Larynx - The first that occurs to us is Cynanche Trachealis. To this various names have been given by different writers, as Angina Polypsoa, Trachitis, the name is Flues. The latter is a corruption of the word Flaves which was attached to this disease from the difficult respiration which attends it. The best Nosological title however that we can apply to it is Trachitis, as we thus clearly designate its nature and preserve a uniformity in the medical nomenclature. It is said to be a modern disease and the credit of having brought it first into notice & explaining its nature has always been conceded to Dr Horne who was professor of Materia Medica in the University of Edinburgh about the middle of the last Century.

Consulting earlier writers however I find a distinct account of it stated by Dr — who describes it as a new disease occurring at Cornwell in England & making extensive ravages

in that country —

Cynanche Trachealis is principally confined to early life, prevailing among children from 1 to 5 years of age. I have known it to occur as early as one month after birth, but these cases are extremely rare, & may be considered as a deviation from the course of nature, & the general character of the disease. Families within my own practice appear to be subject to it, as I am called to the adults almost every month, —

Notwithstanding that it is alleged to the contrary, yet we have no reason to believe that it ever arises from contagion: It seems to be chiefly produced by a moist, cold, or misty atmosphere and hence prevails most extensively during the spring season of the year.

By some it is said to be epidemic occasionally and this is perhaps true. In some particular places it is endemic. It is said that it is scarcely ever seen in Baltimore whilst Fells Point which is only a small distance from the City is depopulated every succeeding spring, & it is perfectly well ascertained that it is extremely prevalent at Leith near Edinburgh, whilst Edinburgh is nearly exempt from it. (See Cullen for its History)

5 In the application of cups there
we must not apply them to the front
part of the throat for we shall
induce suffocation

By Nosological writers this disease has been divided into Spasmodic & Inflammatory. To me however it appears that all cases of Cynanche Laryngealis which come on suddenly must partake of a spasmodic nature, & this is proved not only by the early symptoms of the disease, which corresponds with this view of its pathology but by dissections. These have been frequently made after sudden death, & have not revealed any of the phenomena of pre-existing morbid action: hence, death, must certainly have resulted from spasmodic constriction of the Pharynx. But under such circumstances, or when the disease comes on slowly, & is the effect of gradually extending inflammation, then it is of course an Inflammatory affection. But whether the complaint be Spasmodic or Inflammatory we are in either case to adopt precisely the same treatment.

My mode of treating Cynanche Laryngealis is extremely simple, & it has proved so successful that I always approach this complaint with greater confidence than any of the other affections which are peculiar to children.

I commence with a free administration of Emetics, & of these I prefer Tart. Emet. repeated at short intervals in the most powerful doses. At the same time the child should be placed

& which I think preferable - when
there fail the juice of Garlic or when
this cannot be used onions in the form
of oil may be considered an excellent
remedy

in a warm bath for about 10 or 15 minutes.

The warm bath is a most useful remedy, and has often effected a cure by itself. But if the Emetic should not operate or if it should operate without making a beneficial impression, we must resort to copious *lys*, and at the same time repeat the emetic & warm bath.

The attack must be extremely pertinacious if it does not yield now. It will sometimes continue however in spite of all these powerful remedies & our next step must be topical bleeding by cups or leeches - and if necessary we should apply a large blister upon the throat extending from ear to ear. But if this should fail or the symptoms continue, we shall never fail to procure immediate relief by pushing the *Lancet ad deliquium animi*: when carried to this extent *lys* will prove invariably successful.

My experience with this disease is large and never to my knowledge has it failed in one single instance: the hoarseness, cough, fever, and all the symptoms of the complaint subside in a moment. The disease being in this way broken we are then to administer Calomel, but not in small & repeated doses as is generally recommended, but in very large quantities in order to produce the most active purgation. It thus effectually opens the bowels, carries

off all lingering remains of the disease, abates
a relapse, & confirms the recovery. But if some
hoarseness, cough, & difficult respiration exists I use
the *Polygala Seneka* as an expectorant - Its best pro-
= us are displayed when the remnants of the disease
exist, though it may be useful in the early stage
as an Emetic; here however *Fart's Emet.* is decidedly
superior to it, & should always be preferred.

As laid down this is the practice in the
forming or incipient stage of *Cynanche Trachealis*
It is now restricted to the Trachea & is either a
spasmodic affection of the muscles, or a slight
inflammation of the mucous membrane. But
if it be allowed to continue for 8 or 10 hours, or even
for a shorter time the inflammation extends to
the Bronchia & Lungs, a great quantity of mucus
or Phlegm is accumulated, & the Pulmonary vessels
are engorged as in *Peripneumonia Notha*.
The appearances which are now exhibited are very
different: At the commencement of the attack the
symptoms are, a hoarse voice, a dry barking cough,
fever, anxiety, restlessness, & an indescribable sort of
wretchedness; the child throws itself into different
postures & cannot be soothed. It cries, whines
and frets, & is always uneasy, & seemingly with-
= out any positive change. The disease conti-
= nuing, the circulation is interrupted, the Lungs

execute their office imperfectly; the complexion is mottled, the cheeks circumscribed and flushed, the eyes are prominent, the pupils dilated, & the expression of the countenance is wild and haggard - The respiration is now laborious with a full & disturbed pulse, or if the respiration is free it is accompanied with a sinking condition of the pulse, -

What is to be done in this alarming state of things? The disease is now a Peripneumony & must be treated accordingly - We must first equalize the circulation by placing the patient in a warm bath & administering active Emetics, as the Sulphate of Zinc or if this is not at hand the Tart. Antim. And when the pulse justifies it, a little blood should be drawn, but we must take but a very small quantity at a time - After allowing the blood to flow for a short time, we must stop it, and watch the effects which are produced, & if they are beneficial we may go on bleeding from time to time until at length our aims are accomplished. This circumstance arises from the great danger of taking away too much blood during an engorged state of the vessels, for the loss of even a very small portion may reduce them below the point of reaction, & death would be the consequence. But where the Lancet cannot be used we

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must resort to cups & Leeches. As co-
-operating with these remedies a Blister may be
applied over the whole chest, or if the case is ur-
-gent & requires more prompt means of producing
expectoration we may apply cloths dipped in boiling
water, or in a decoction of Turbentine & Cantharides.

The subsequent treatment consists in the plen-
-tiful use of Expectorants: The Antimonial Wine,
the Oxy-mel or Unigae of Squills, and the decoction of
Snake Root will answer very well. Much advan-
-tage will be derived from the liberal use of Calomel
which is at all times an excellent expectorant, &
indeed would seem to be a specific medicine
in this case. - It is perhaps known to you, that
by the practitioners in Columbia, this disease is
treated entirely by Calomel, & the quantity which
they give would seem almost incredible if we did
not know that in *Cynanche Trachealis* there is almost
a total extinction of susceptibility to impressions.
I have seen the quantity of $\frac{3}{4}$ or $\frac{1}{2}$ given to a
child in the course of 24 hours, but if they had
employed the Linctus before hand the 100 part would
have answered just as well. You will find cases
of this kind in Hamiltons Midwifery -

In the preceding observations I have
endeavoured to give you some account of the
Pathology & treatment of this disease.

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The result of my experience which is extensive
is, that it first consists of an inflammation or spasm
of the Larynx, & in its advanced stage becomes a
Pneumonia & other, the treatment of which I have
endeavoured to point out as well as my time will
admit - But I wish to call your attention to a new
view which has been presented of *Cynanche Trachealis*
not as a mere theory, but as leading to a practical
improvement in the treatment of this disease, which
has been said of a membrane lining the internal
surface of the Trachea - It is supposed by many
to be the cause of the difficult respiration attending
this complaint - That it does now then exist can-
not be denied, but dissection shows it to be a rare
occurrence, perhaps not one case out of 500

Under the impression just mentioned, that it ob-
structs free respiration the operation of Tracheotomy
has been proposed: whether this be a good practice
or not, I shall not pronounce - but in this City it has
always failed. If however this is evidence at any
time that the membrane is present I should suppose
that we should be warranted in trying it, But I
do not know that it would always be beneficial
for sometimes the disease is not merely a local
affection, but extends over the whole of the Bronchia
and Lungs, exhibiting symptoms of a suffocated
condition of the Pulmonary organs by Phlegm or Blood,

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There are two causes which have conspired to render *Cynanche Trachealis* so fatal as even to be called the opprobria Medecorum. The 1st is the erroneous notions respecting its Pathology. 2nd Its feeble treatment. It is almost a universal impression that children, owing to the delicacy of their nature are not able to bear powerful & rigorous remedies. & the consequence is that in this disease practitioners have accepted an inert & neutral practice, of that kind which declares neither for the one side nor the other; the consequence is the great mortality. The Emperor of France held out a reward of 10,000 Francs for him who should produce the best dissertation on the nature & treatment of the disease, but after all it was given to a man who recommended nothing for its cure but a weak solution of *Hepas Sulphuris* which according to his accounts would, after being used for 2 or 3 days completely overcome the complaints - but in this country we should as surely kill the child by this treatment, as if we were to shoot it through the head.

By no narrow experience I am persuaded that as regards the delicacy of the child being an objection to rigorous treatment, the contrary is true. I know that children display an uncommon tenacity of life & survive

under circumstances that would destroy adults, 19
They have been found alive on the breast of their
mothers who have perished with cold -
They resist contagion better than adults & recover
more easily from contagious diseases. Nor is this all
they are better able to support the operation of
medicine as Emetics, Cathartics &c. & to this we may
add Nerves. It is well known that during the growth
of the human body the proportion of fluids greatly
exceeds that of solids, & on the account of the fullness
of the vessels in children they are extremely liable
to inflammatory complaints & diseases of this kind,
which often require blood. This is well known to
Physicians who are acquainted with the diseases of
children. Children are moreover endowed with res-
torative powers superior to adults - They recover
much more readily from wounds, surgical oper-
ations &c. From these considerations while the
least indication of life exists in a child under
treatment you should not be discouraged, nor look
upon the case as desperate but continue your exer-
tions with the greatest Zeal - You may thus often
effect a cure which will shed lustre on the medical
profession & procure for your own skill a glorious
triumph

Malapropithec is a very useful remedy in this disease, & to relieve hoarseness - It is made the same as when substituting malapropithec instead of Opium - Dr. Thompson has used Cloffmiller Anodyne Syrup & Lardum in doses an inhalation in the disease on himself - Inhalation of creosote in pharynx or larynx has been used

Catarrh

In continuation of the history of diseases of the Respiratory system, I shall next make some remarks on Catarrh. - This disease consists in an increased secretion from the mucous membranes of the nose, throat & bronchia, attended with more or less fever: It is endemical to Northern climates, & arises from sudden transitions from heat to cold, and vice versa. It occurs most frequently during the winter season, as vicissitudes of weather are much frequent at this season of the year, but it is occasioned by other causes also, as abstractions from dress, exposure to air, sleeping in cold wet, or damp rooms, & in short from any circumstance that has the effect of suppressing the perspiration of the body.

It usually commences with difficulty of respiration, fullness of the pulse, and a pain in the head, which is either acute, dull, or heavy, & there is frequently distilled from the eyes & nose an acrid fluid which excoriates the skin. Associated with this is Coryza as it has been called very great lassitude, muscular soreness, and a cold shivering, or at least a greater than usual sensibility to cold at this period.

These symptoms do not continue long before

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several others occur, as heaviness of the voice,
and roughness in the Trachea, accompanied with a
stricture across the chest, & a dry irritating cough.

As just described such is the ordinary character of
catarrh, but if it has not been badly managed it will
completely subside in the course of a few days.

The fever first goes off, & then the cough becomes
easier, & is accompanied with expectoration of a
thick mucus - Simple however as this affection
is at first, by neglect or improper management, it
may be converted into the most serious diseases.
I have known it to terminate in anginous affec-
-tions of the Lungs, & croup has very often occurred
in children, simply from neglected cough - Cold brings
on the worst of Peripneumony in advanced life -

But as much as there are to be dreaded, they
are trifling in comparison with the horrible com-
-plaint of Pulmonary Consumption, the most cases
of which I am convinced arise from ill treated catarrh.

Treatment. - For the cure of catarrh my own expe-
-rience tells me that there is nothing equal to a moderate
dose of Lascianum taken just before going to bed -
I have tried this more than 100 times in my own
person, & much oftener in my patients with the
greatest success - It excites a universal glow over
the body, unaccompanied with much or any pers-
-piration, & I should say from my own observations

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that I do not think any advantage is derived from combining diaphoretic remedies with it.

Here the Laudanum acts as a diffusible stimulant, & is of itself sufficient to overcome the feeble action of the forming cataract. On this subject Dr. Physic fully agrees with me. If however we are precluded from the use of this medicine by the prejudice of the patient, idiosyncrasy, or other circumstances, it will be right to resort to some of the lenient means of sweating, as pediluvium - the Spiritus Mindereri or the Antimonial preparations, and the operation of these should be promoted by warm leeches &c.

This simple treatment as here laid down is applicable only to the incipient state of the cataract: when however the disease is fully formed & more energetic and decisive mode of treatment is required. In our climate when it is violent, it is not to be managed without Ph. the quantity & frequency of which is to be regulated according to the pulse & condition of the system. As a general rule however one bleeding if copious will be sufficient to subdue the force of the disease: but instances have occurred which refused to yield even after 30 of blood had been drawn at different times. As auxiliaries to the Lancet, purging should be resorted to as early as possible, and for this purpose the saline cathartics are universally preferred. Any of them may be employed alone, &

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will prove beneficial, tho' I am decidedly in
favor of Nitro & Carb: Antimony in combination,

A very common, & a very efficacious recipe is

as follows viz: ℞ Sulph: Soda — — — ʒi
Nitro ————— ʒij ʒij
Carb Emet ————— ʒss

Divide this into 4 powders & give one every 2 hours
until the bowels are gently evacuated. It has long
been a favorite practice with many physicians
to treat this complaint exclusively with Antimony
to induce nausea & relaxation of the surface. &
sweating seems to be indicated. It is fashionable
in Great Britain to treat the disease exclusively in
this manner, & in that country it prevails perhaps
more than in any other climate, But whatever
merits may be connected with the practice I am
persuaded it will not answer here. As regards
the United States this complaint is often character-
-ized by the highest degree of inflammation, and
exacts the most efficient depletion is —

Much more decisive effects will be obtained
from the Emetic operation than from mere nausea.
When this is early resorted to, there are few cases
however violent that it will not remove or greatly
mitigate. But Emetics are unpleasant rem-
-edies, & cannot easily be given except in cases of
children, & even in them they should not be used

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in the advanced stages of the complaint when there is pain & inflammation. Under such circumstances, it is our remedy, & should never be dispensed with, when this has been performed and the humors have been put into a soluble condition then we resort to the antimonials in nauseating doses.

Blisters by many are not a little confided in, in this disease: when they are well timed they are certainly beneficial, & sometimes of the first importance; but they will be productive of much inconvenience if applied too early, as when much cough exists they will harass & distress the patient without in the least alleviating it. In the declining stages however when there is a hard lingering cough and pain in the chest, then Blisters will be highly serviceable.

We all know how much cough mixtures have been talked off, & how often they have been employed. Almost every one has his cough mixture to recommend, & speaks of its efficacy in the most confidential tone - all of them however contain Opium in some shape or other, & it is therefore evident that such medicine cannot be administered with advantage at all times. Before the disease is broken, which will be evidenced by perspiration they would be injurious, producing head ache, &

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aggravating the symptoms - but often the case
has arrived at the point designated, they not only
prove useful, but are the most important of our
remedies. I shall omit detailing them all & content
myself with mentioning to you some of the best of

them - To promote expectoration & allay irritation
I have found nothing so well calculated as the fol-

=lowing - \mathcal{R} Extract Glycyrrhizae ——— $\mathfrak{z}\text{ij}$

Disolved in warm water ——— $\mathfrak{z}\text{ij}$

Spirts Nitro Duli ——— $\mathfrak{z}\text{ij}$

Nit Antem ——— $\mathfrak{z}\text{j}$

Laudanum ——— guttae 40

Dose a table spoon full every 3 hours -

Another you may use is as follows -

\mathcal{R} ^{or nuxega} Symplic of Squills ——— $\mathfrak{z}\text{j}$

Nit Antem: ——— $\mathfrak{z}\text{j}$

Sp Nitro Duli: ——— $\mathfrak{z}\text{ij}$

Gum Arab ——— $\mathfrak{z}\text{ij}$

Laudanum ——— guttae 40

Water ——— $\mathfrak{z}\text{ij}$

Dose as above -

As third you may take is thus prepared -

\mathcal{R} Sab: Lartee ——— $\mathfrak{z}\text{ij}$

Nit: Antem: ——— $\mathfrak{z}\text{j}$

Laudanum ——— guttae 40

Sp: Lav: Comp: ——— $\mathfrak{z}\text{ij}$

Water ——— $\mathfrak{z}\text{ij}$

Dose the same -

Perhaps it is known to you that the vegetable
and mineral alkalis have of late acquired considerable
reputation in Pterygia. In this city it is now a
very popular practice, & I believe I first introduced
this medicine in this complaint - I adopted it from
Beaumont, & brought it with me when I returned from
Britian. They are also used in common coughs with
advantage.

18 I have now ran over the remedies most app-
-roved off in cataract: little however will they avail
if we do not pay the strictest attention to the anti-ph-
-logistic plan - As to diet it should be of the very
lowest kind, consisting of demulcent drinks, as
barley water, Flaxseed tea, mucilage of Gum arab:
Loaf sugar & water, all of which may be rendered
agreeable to the patient by the addition of Lime juice.
It is fortunate whilst these afford sufficient nourish-
-ment to the patient, they also attenuate some of the
symptoms of the disease - I am the more anxious
to press upon your attention the necessity of this
diet as the prejudices of mankind are against it.
"To feed a cold & starve a fever" you know is a very pop-
-ular aphorism, but like most other vulgar maxims
it is entirely erroneous. For we know very well that
a cold is a fever, & often a very high one, & therefore
insist upon the great necessity of a low diet, even
where more may be allowed than merely demulcent

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which I have mentioned - It should be
altogether vegetables, as Rice, homony, Potatoes
and the vegetable broth - The latter is prepared
in the following manner, Take 3 Turnips - 2
Potatoes - 2 onions, and a little celery - add to these
a gallon of water & boil them for 2 or 3 hours, or
untill the texture of the vegetables is completely
destroyed, then pour the liquor on some dry toast
and add a little salt to make it palatable - The
patient will tell you this is much more pleasant
than any of our meat or chicken broths, & besides
it is not the least stimulating -

The vegetable jelly is also very pleasant, and
is thus made - Take 3viij of Gum Arab; & 3j of loaf
sugar - Simmer them down to the consistence of a
jelly, then add a little Lemon juice, this will be
found as agreeable as the calves foot jelly without
the least stimulating properties -

The treatment here laid down is adapted only
to the ordinary circumstances of the disease, as it is
generally found in young people or in middle
life - But in advanced life it is much modified
and often proves fatal to the patient; It then
comes on suddenly & is distinguished by laboured
respiration, a flushed countenance, ~~and~~ a
feeble pulse, & an accumulation of Phlegm with-
out the power of discharging it.

Exposition Universelle

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From the latter circumstance it has been properly styled Catarrhus Vothae - In this case if the Pulse & state of the system do not contra-indicate it, Vps will be often useful, by equalizing the circulation & alleviating the symptoms - But for reasons commonly mentioned we must be cautious with the Linctus, & should never draw blood to any extent at one time - When it cannot be employed, or when it has been carried as far as is consistent with the safety of the patient, without being as effectual as wished - Ipecac will be found of great advantage, much benefit arises from vomiting, it discharges the morbid accumulations of the Bronchiae, equalizes the circulation and completely changes the condition of the system -

Blisters are the next best remedy, they should be sufficiently large to cover the whole chest; by their action they impart tone to the Lungs, by which they are enabled to expel the accumulations of Phlegm and a relapse is avoided. Contrary to the directions given respecting opium in the ordinary circumstances of Catarrh, it may be here used with safety in all the stages of the disease - It is never hurtful, & often displays the best effects - It may be given by itself, but it is usual to combine it with some of the more active expectorants, as Squills - Vob. Alkali, Spasmodica, Mustk, Myrrh, Lolu, & other balsamic articles -

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Catarrhus Epidemicus

I am now to make some remarks upon the Catarrhus Epidemicus - This is perhaps the widest spreading disease that we are acquainted with, not only pervading countries, but even the whole world at the same time.

By the Italians it has been very appropriately entitled Influenza - a term by which it is now universally known! It has prevailed through all ages, & is described in all the medical writings, from the earliest dawn of medical science, down to the latest periods - as to its course it is said to progress from South to North - The reverse of this is sometimes the case - Between the common catarrh & Influenza there is a very striking resemblance; they differ however inasmuch as the former arises from the sensible qualities of the air, whilst the latter depends upon unknown irritations of the atmosphere - This, it is true is said to arise from contagion, & the assertion is supported by no inconsiderable weight of authority - but nevertheless I have reason to suppose this altogether a gratuitous notion, & indeed there is much counted evidence on the subject.

It is stated that during the prevalence of this disease, the inhabitants of the most sequestered situations, as patients in the hospitals, & monks

My dear friend

I have just received your letter of the 10th inst. and am
glad to hear from you. I am well and hope these few lines
will find you the same. I have been thinking much of late
of the many friends who have passed away and the many
who are still with us. I feel that I am not alone in this
world and that I am surrounded by the love of many
friends. I am sure that you are the same and that you
are still surrounded by the love of many friends. I am
sure that you are still the same and that you are still
surrounded by the love of many friends. I am sure that you
are still the same and that you are still surrounded by the
love of many friends. I am sure that you are still the same
and that you are still surrounded by the love of many friends.

Yours truly

J. J. [Signature]
I have just received your letter of the 10th inst. and am
glad to hear from you. I am well and hope these few lines
will find you the same. I have been thinking much of late
of the many friends who have passed away and the many
who are still with us. I feel that I am not alone in this
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the same and that you are still surrounded by the love of
many friends. I am sure that you are still the same and
that you are still surrounded by the love of many friends.

in monasteries, were by no means exempt
from it, but were observed to be affected in common
and at the same time with all other individuals
But independent of this, the Influenza assumes
all the laws of Epidemics - It visits us at
stated intervals, sweeps over whole countries
and whenever it prevails, all subordinate
diseases are subjected to its predominant influ-
-ence - Like epidemics moreover it is va-
-riable in its character, being sometimes highly
inflammatory, & at others accompanied with
a Typhus condition of the system -

But most generally it is of the nature of
of an ordinary catarrh, & requires in its treat-
-ment the same description of remedies
apportioned however to its greater violence

But should it be of a Typhoid character
which is rarely the case, it must be subjected
to the same treatment with our winter epid-
-emic - and if Billious treated as such, -

Study the disease well you
that are candidates

Pneumonic Inflammation

Leaving the subject of Catarrhs, I pass on to the consideration of the nature & treatment of Pneumonic Inflammation - By some Nosologists a great variety of cases have been made out of this! thus - Inflammation of the Pleura is called Pleuritis; of the Lungs themselves Peripneumony - an enlarged state of the Lungs is denominated Peripneumonia Notha - and Rheumatism of the Intercostal muscles, Pleurodine - But this division is too minute & by no means necessary to be retained - I shall divide Pneumonic Inflammation simply into Vesicae Notha

Peripneumonia Ferax

This comprehends Pleurisy & Peripneumonia; between these two there may be some difference, but we have no diagnostic by which we can distinguish them from each other, & even if we had it would be of no importance, since the treatment in either case is precisely the same.

Whether the inflammation be seated in the Pleura or Lungs it is always known to exist by pyrexia difficult respiration, dry cough, & a pain in the breast, or on one side - Before I proceed to the treatment I shall read you something on the subject from a well known author - (vide Cullen) -

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As to the causes of this disease, they are the same with those of all internal inflammations -

It chiefly arises from changes of the weather and colds applied to the body, especially if it had been previously heated. It mostly occurs in the winter and Spring, & particularly under a variable and unsettled state of the weather, & generally attacks those that are of a robust & vigorous constitution, of an inflammatory diathesis

Treatment - Of all diseases of this class, with the exception of Cynanche Trachealis - the most durable and best understood is the one now under consideration - Being a high inflammation the indication is extremely simple & intelligible - and there is no doubt as to the appropriate remedies. - All practitioners of whatever school they may be, universally agree as to the absolute necessity of prompt and copious Ph - Even the prejudices of mankind are enlisted in its favour, so much so, that should we meet with any opposition from a patient in the use of the Lancing, we have only to tell him that his disease is a Pleurisy, & all objections to bleeding will be entirely done away -

When therefore we are called to a case of this disease we must draw blood freely & without hesitation making the orifice in the vein large, that the stream may be large & vigorous

There is no fact better ascertained than the great importance of sudden abstraction of blood in the reduction of inflammation - this is indeed so true that $\frac{3}{4}$ of blood lost quickly will prove as efficacious as twice the quantity from a minute orifice - It is necessary that you should bear in mind a circumstance so highly important in practice as this - It is illustrated in cases of fever by Sir J. Fordyce -

It is not easy to lay down an exact rule as regards the extent to which blood should be urged in this case - But I may remark much more danger is to be apprehended from timidity, than from an excessive use of the Lancet - In general I should say that in the case of a stout & vigorous person with confirmed pleurisy, the pulse being strong and the respiration difficult, we should take $\frac{3}{4}$ of blood at the first bleeding - but even this will not answer our purpose always, & in a few hours afterwards we may be called upon to repeat the bleeding to the same extent - This however is not often necessary - My practice is never to tie up the arm until I have obtained a remission of the pain, & difficulty of respiration and I care not whether I draw **XL** or **L $\frac{3}{4}$** of blood

But this rule does not apply nor will it succeed in the advanced stages of this disease & for a very obvious reason, after the inflammation

It has been recommended by
some writers to apply cold in this disease
but this I believe to be a more theoretical
suggestion

The Thoroughwort may also be used

has continued for a few days the minute
or capillary vessels become affected, and as there are
in some degree independent of the heart and great
arteries, no detraction of blood from the general cir-
-culation will have the effect of relieving them.

This pathological view which has not been noticed before
is proved to be correct, & is illustrated by the whole
order of the Phlegmasia - For example in opthab-
-emia we never effect a cure without performing
29 local depletion for the purpose of emptying the
capillary vessels - The same thing applies in
Pneumonic inflammation, but here nevertheless
we must not too hastily relinquish the use of
the Lancet, for copious *lys* is still necessary
to relieve the Lungs, since a vast quantity of
blood is constantly passing through them, &
must aggravate the inflammation - Loss of
blood is better borne in this, than in any other
disease -

Satisfied that we have reduced the infl-
-ammation as far as possible by the general
means of depletion, we must resort to local means
and of these the most celebrated is ~~the~~ Blisters

By some however their utility is altogether
denied, but there is no doubt of their efficacy
when they are well timed - My practice
with which I have reason to be satisfied

The mode in which calomel operates
here is obvious, it stimulates the secretions
of the Lungs & thus excites expectoration

is to apply them after arterial action has been reduced: here they are beneficial, by extinguishing the remnant of the pain, & preventing the further progress of inflammation - But when applied earlier I have found them to produce distress, & to aggravate the symptoms which they are intended to relieve -

Candour however compels me to acknowledge that in this point I am directly opposed by some of the ablest practitioners both of this & other countries.

By Dr Griffiths of this City who is a very excellent and experienced practitioner, the Blisters are at once applied without any previous loss, and after 40 years experience he says that in this way they are productive of the highest benefit - My friend Dr Jackson of Boston, Professor of the practice in the University of Cambridge, informs me that it is his own practice, & that of most practitioners in the vicinity to apply a blister at the commencement of the disease, & his report respecting their efficacy is similar to Dr Griffiths - To all this I shall only reply that my own experience is against it and this I shall never surrender upon any occasion when it tells me I am right -

As preceding blisters in violent cases much advantage will be received from local bleeding by means of cups & leeches applied

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to the Breast - sides & Spine - Indeed these
may be employed at any stage of the disease, & after
general bleeding you will have reason to be delighted
with their effect. - But these not being at hand you
may apply dry warmth, or hot fomentations, such as
hot salt, ashes, corn, oats &c with utility - &

As yet I have said nothing of purging which
is so beneficial in other inflammatory affections -
But as I have said, there are exceptions to this general
rule, so some cases will not bear copious evacuations
from the bowels, and in this one particularly all that
we should do is to keep them in a soluble condition
by the use of Castor oil, or the Neutral salts -

But more confidence is placed in Diaphoretics, &
from our reasoning on the nature of the disease
they would seem to be extremely well suited to it,
Experience however shews that except in its forming
stage they are useless, if not hurtful, but there
are many instances in which copious diaphoretics
at the commencement of the complaint has entirely
arrested or greatly mitigated it - Here the Pleurisy
Root - (*arctopias recumbens*) as it has been emphatically
called seems to be very serviceable - In the
progress of the disease diaphoretics are rarely or never
used, unless as auxiliaries to Ops - The Nitre & Spirit;
and the Antimonials are of use, not however so as to pro-
duce nausea, although I believe it would do no injury,

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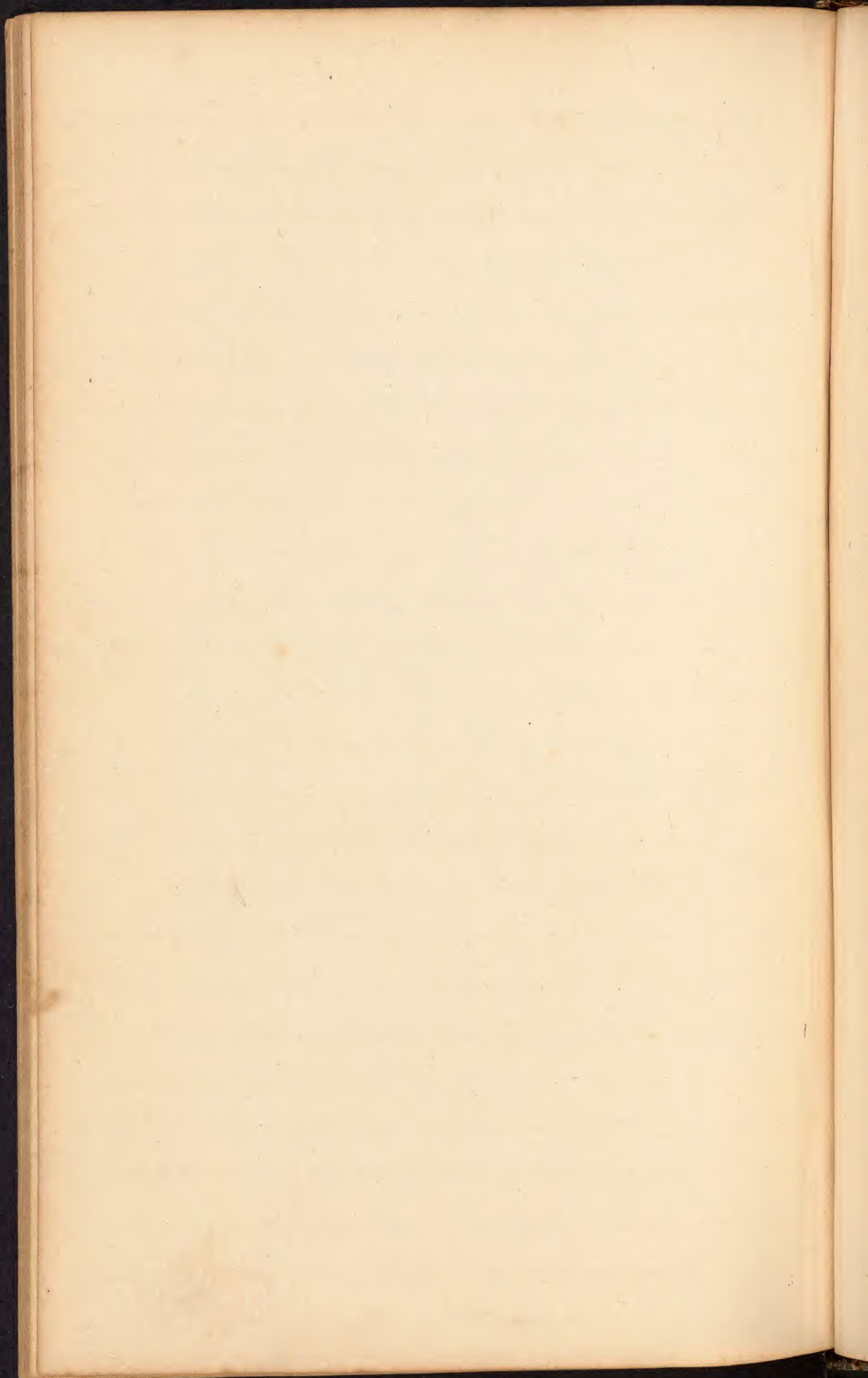
As soon as the cough becomes loose, & expectorations
takes place, then the disease is broken, & we should
resort to the various cough mixtures that have been
mentioned as applicable to Catarrh.

But sometimes when the disease has abated, some
of the more violent symptoms remain, as tight-
ness of the chest, & a dry, hard & sharp cough -
when these continue the best prescription is Op-
ium, Ipecac, & calomel repeated at intervals.

If the Calomel should ever salivate, so far
from being an objection to it, it will be highly
useful in extinguishing all remains of the dis-
ease: it will also do away all predispositions, &
thereby prevent a relapse, & be a security from
Hydrothorax, Consumption &c.

As detailed such is the Practice in ordinary
cases, but the disease assumes various forms, &
is greatly modified as to its violence - It would
be impossible however to point out exactly the
treatment that is applicable to every form. I
have laid before you the general plan, & the
rest must depend upon your own experience
& sagacity -

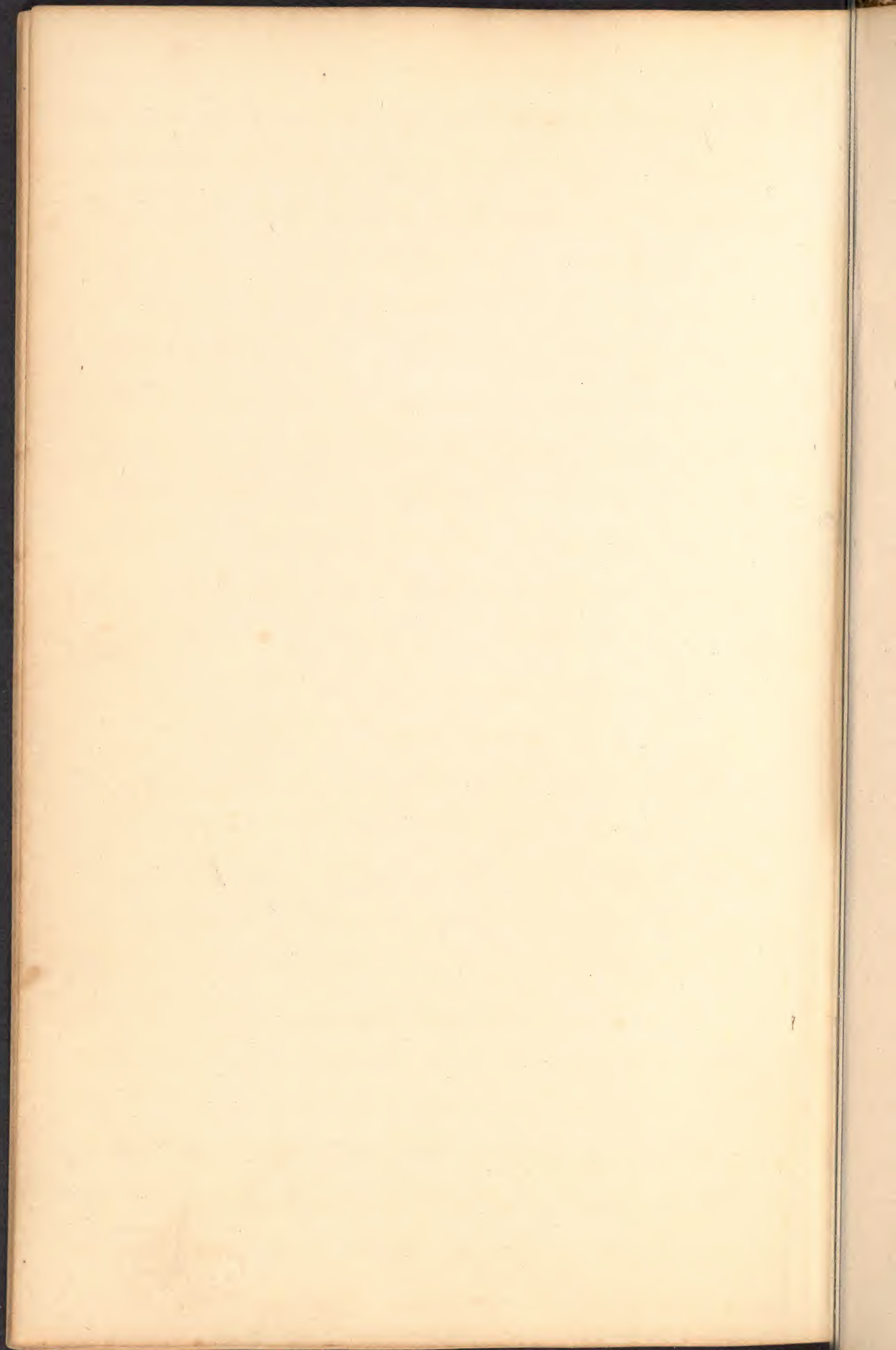
Nevertheless there is one form that is
so common, & so frequently proves fatal, that I
shall not altogether overlook it - I allude to
the Billious Pleurisy - to this form are added

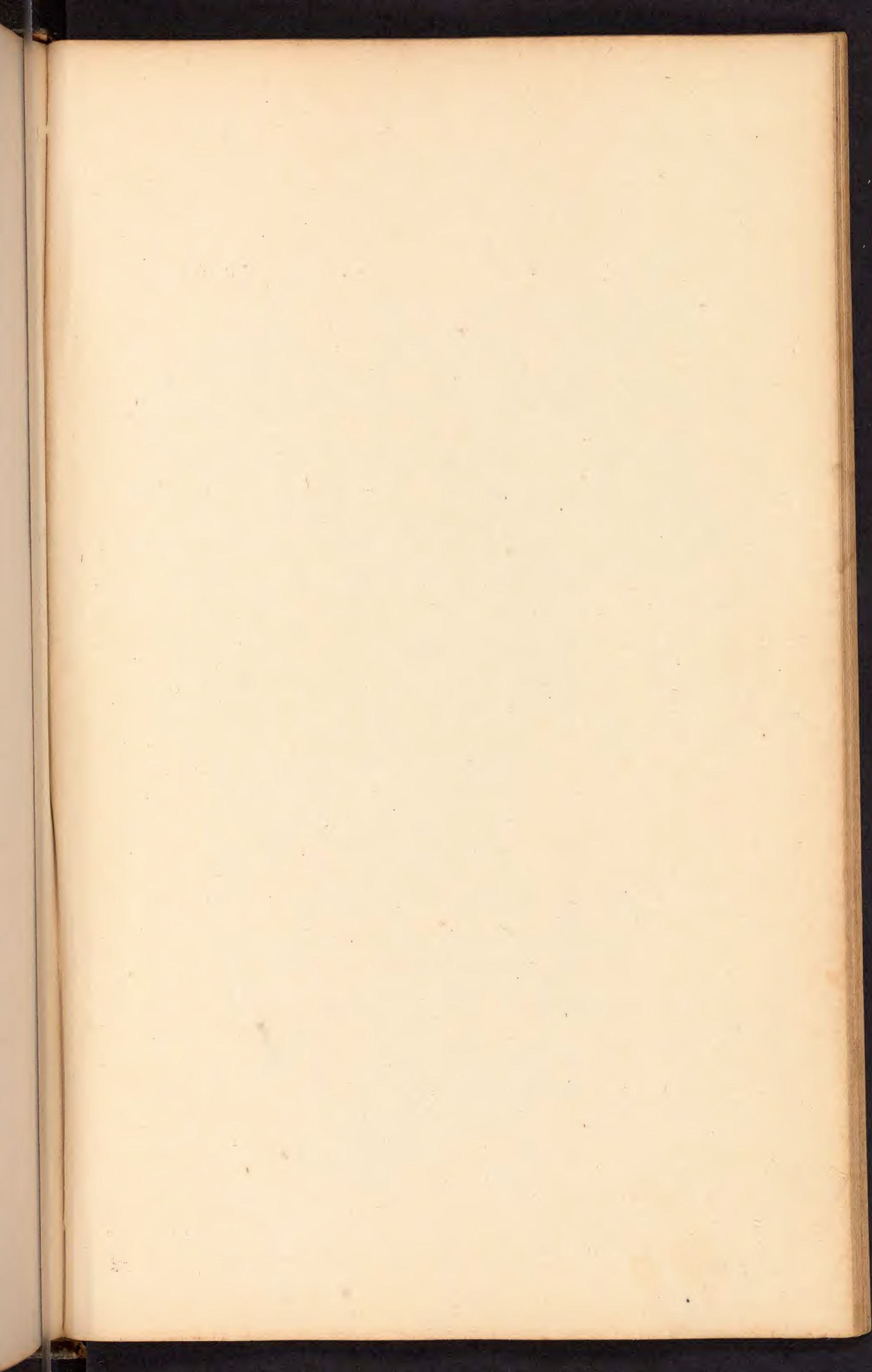


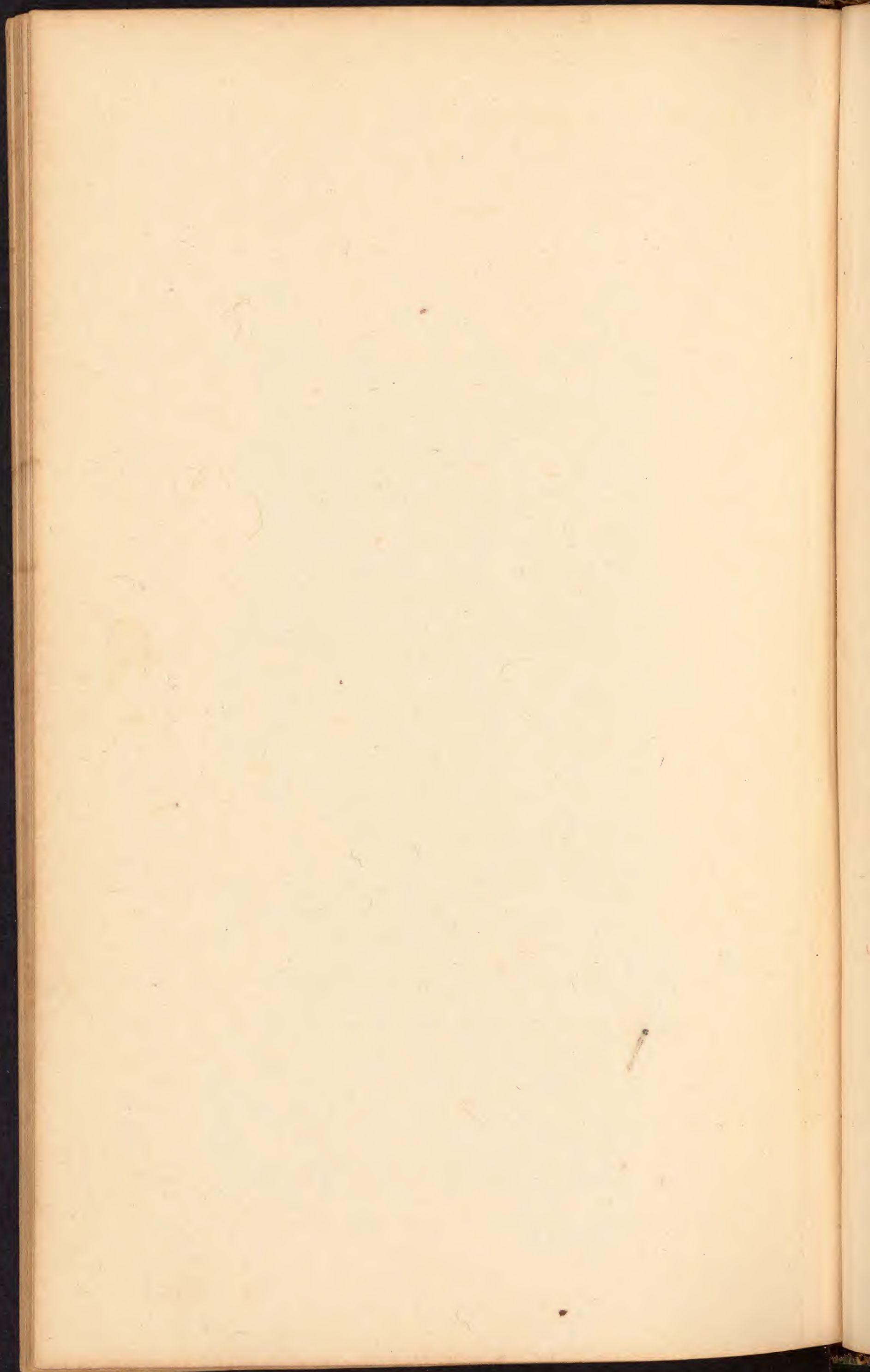
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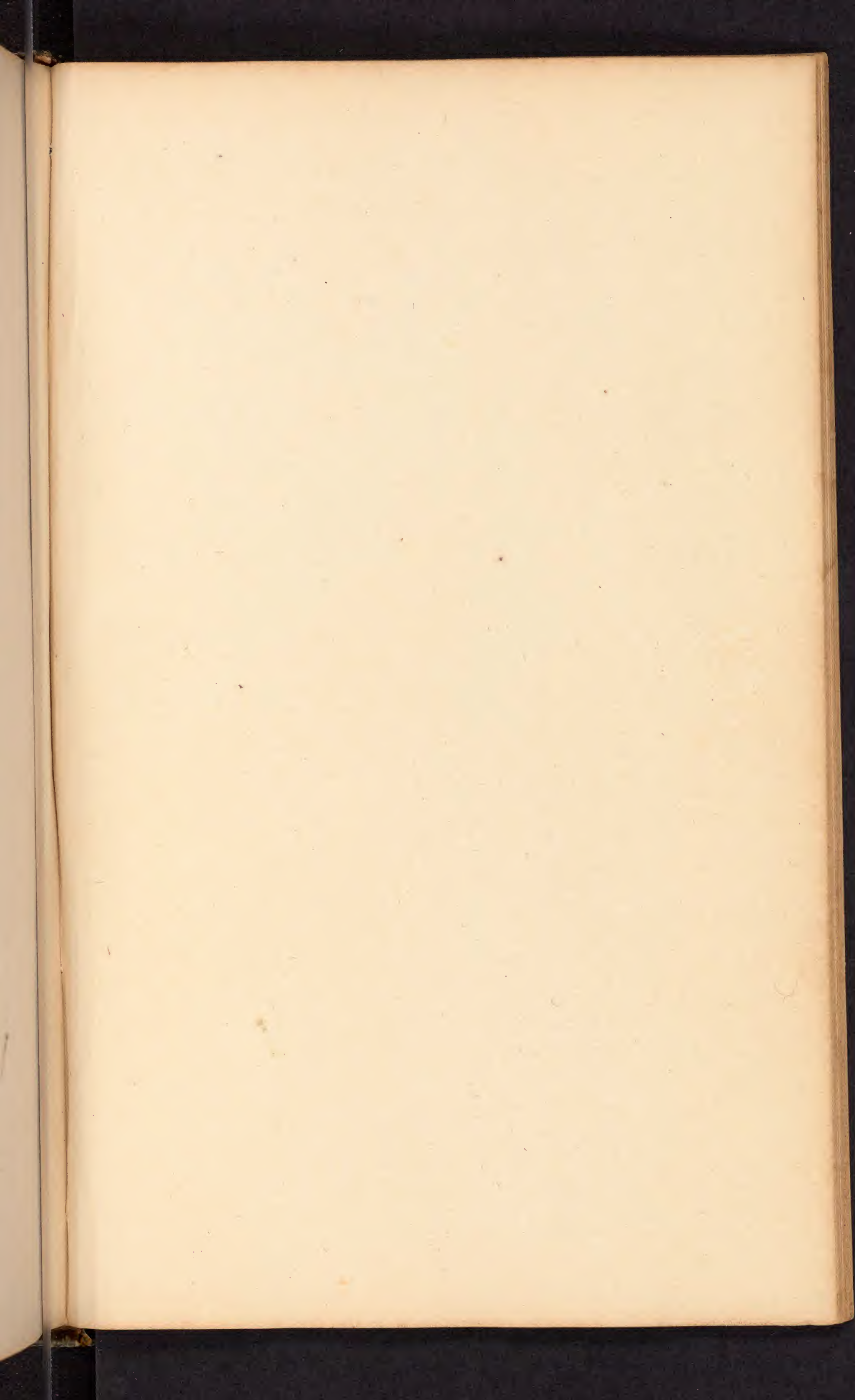
all the characteristics of ordinary Pleurisy,
many of the symptoms of our autumnal bilious
fever, as head ache, red eyes, turned countenance
gastro distress, vomiting of a dark bilious matter,
and a dry, dark and furied tongue - This is dif-
-ferent from common Pleurisy in being attended
with less action, and in requiring less depletion.
Depression usually occurs after one or more bleedings
and we should desist from the further use of the
Lanceet - When the Alimentary canal has been
evacuated by Emetics, or mercurial purges, then we
should administer draughts of the infusion of Serp-
-entaria in order to obtain copious perspiration
for 12 or 24 hours -

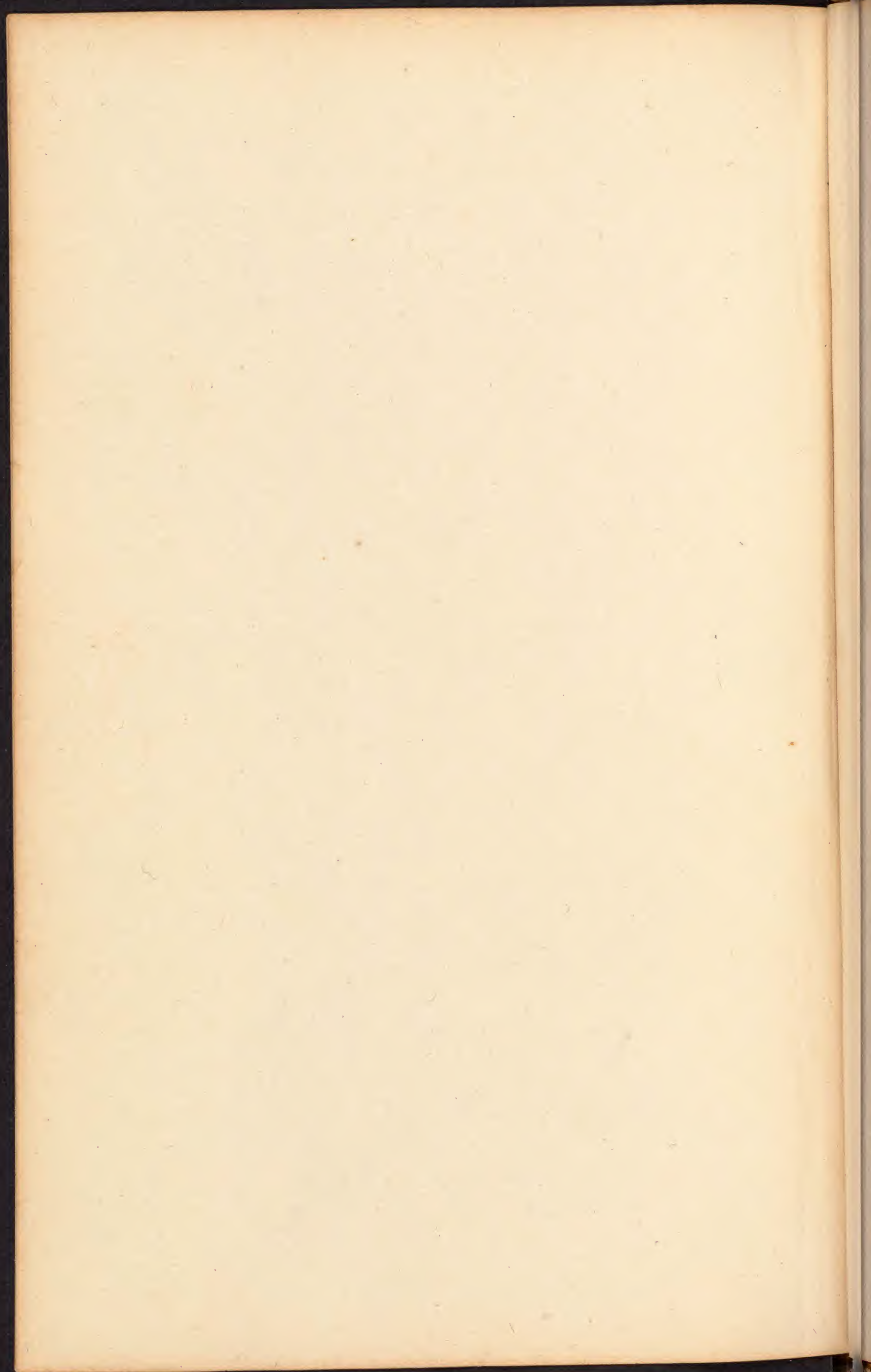
This medicine seems to be adapted to
Bilious Pleurisy on several accounts - Bilious
Pleurisy occurs in miasmatic positions, where Inter-
-mittents prevail, & they retain a slight degree of this
type, to which as formerly mentioned Serpentaria
is well suited, & it has been already mentioned
that this medicine is highly useful in checking Bilious
Vomiting - And while it answers these two indications
we know that it is a powerful tonic & diuretic & therefore
calculated to produce a salutary & permanent impression
upon the disease - If copious perspiration does not relieve
we must resort to local bleeds, then to Blisters large enough
to cover the whole breast -

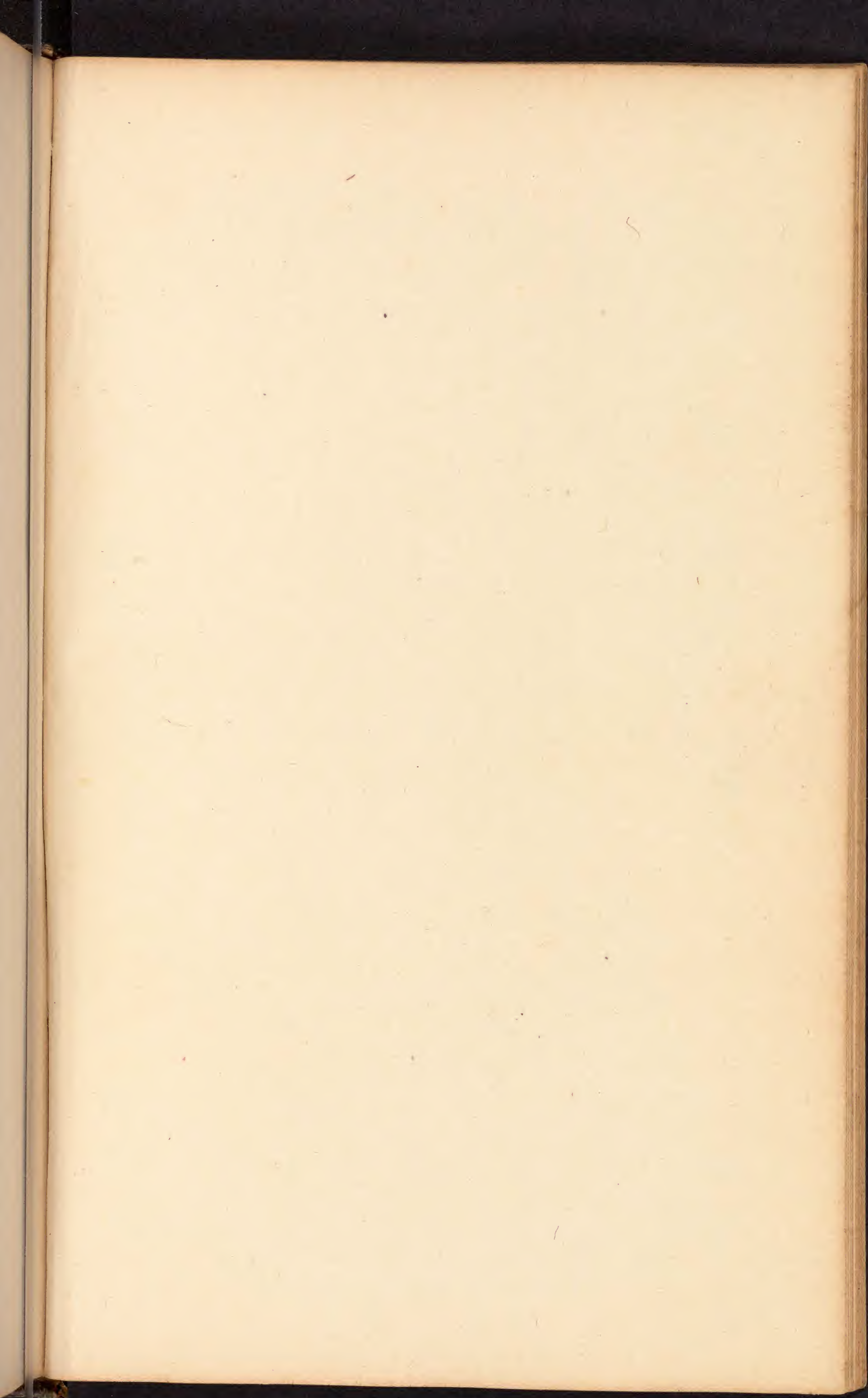


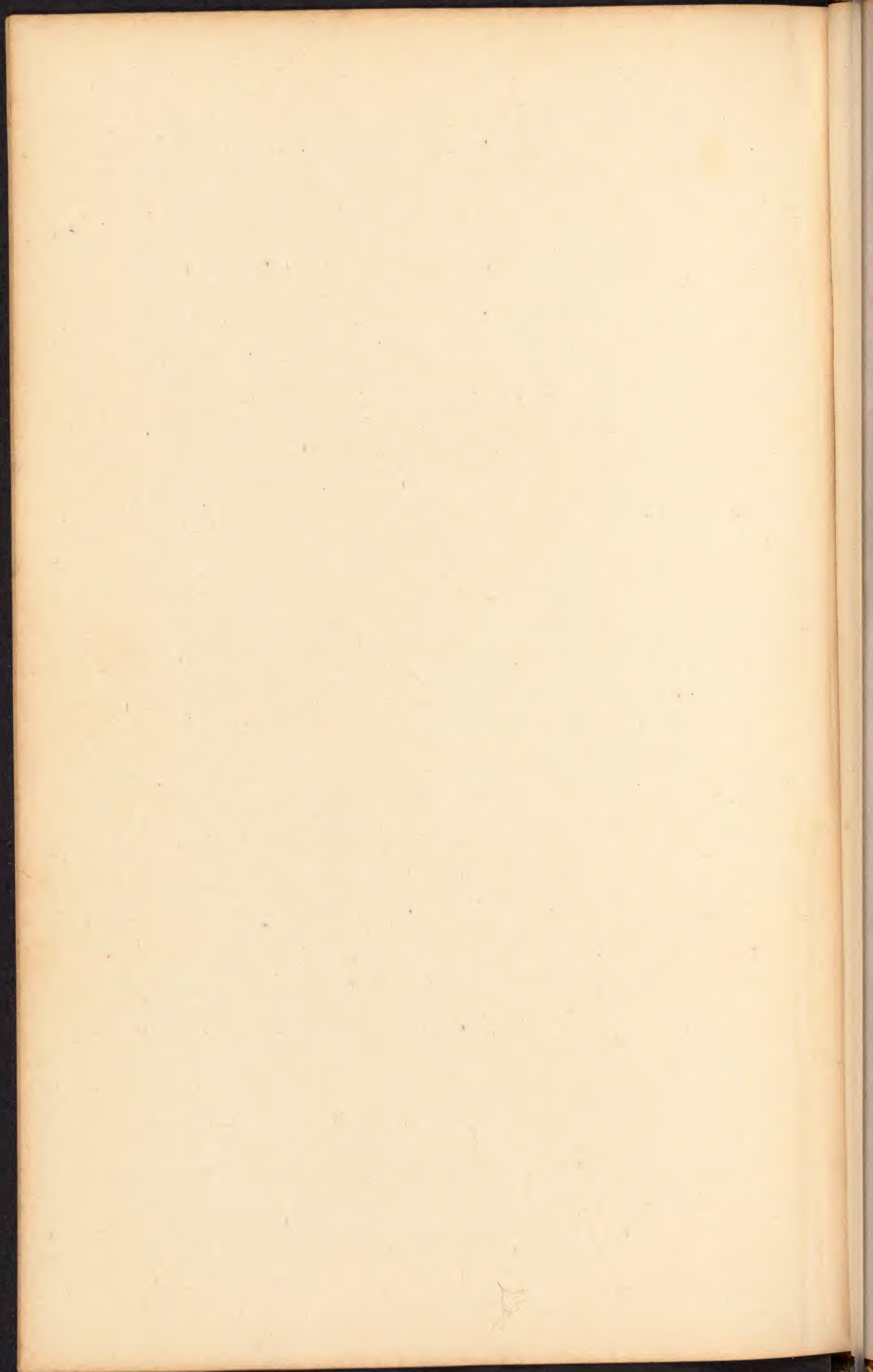


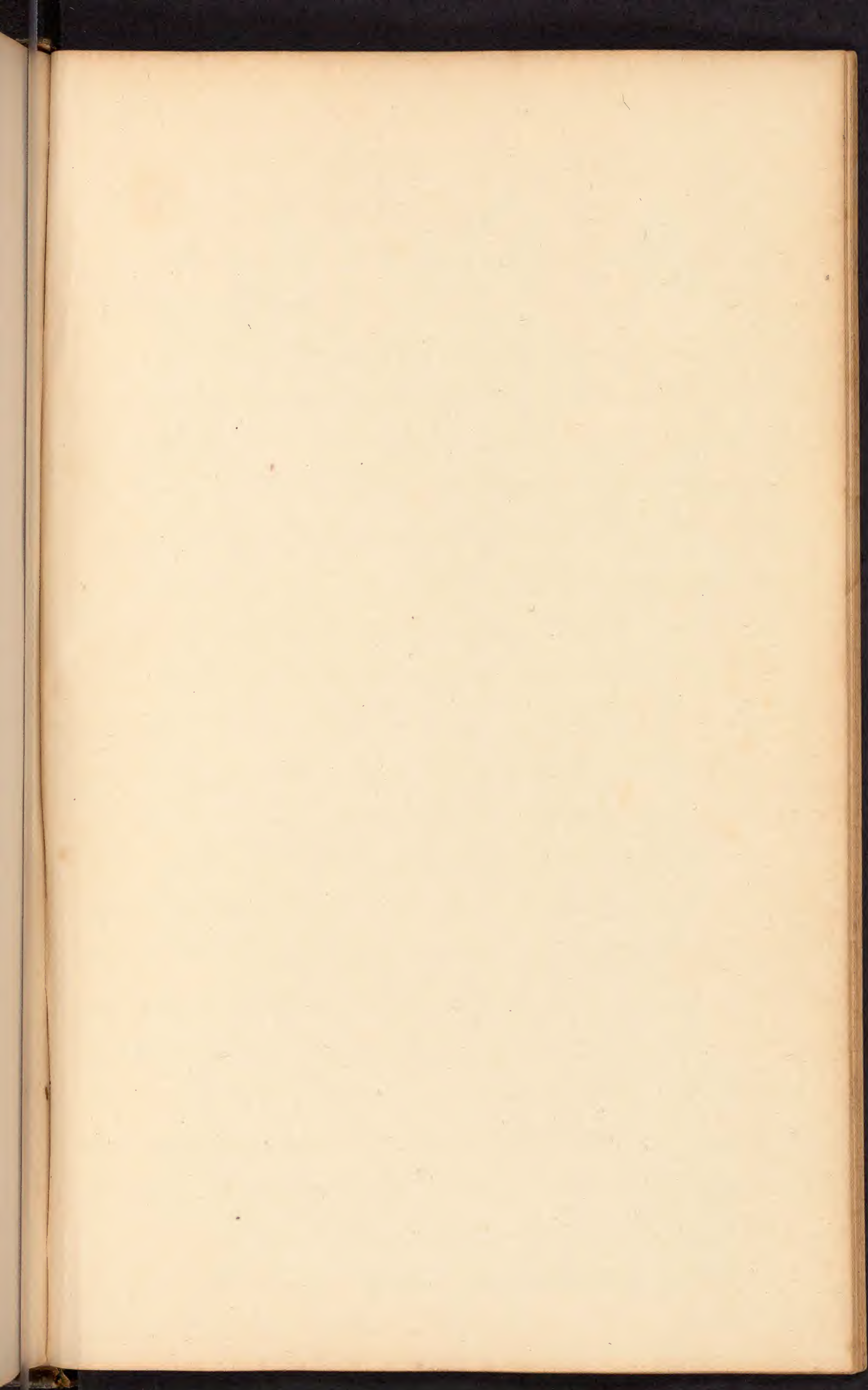


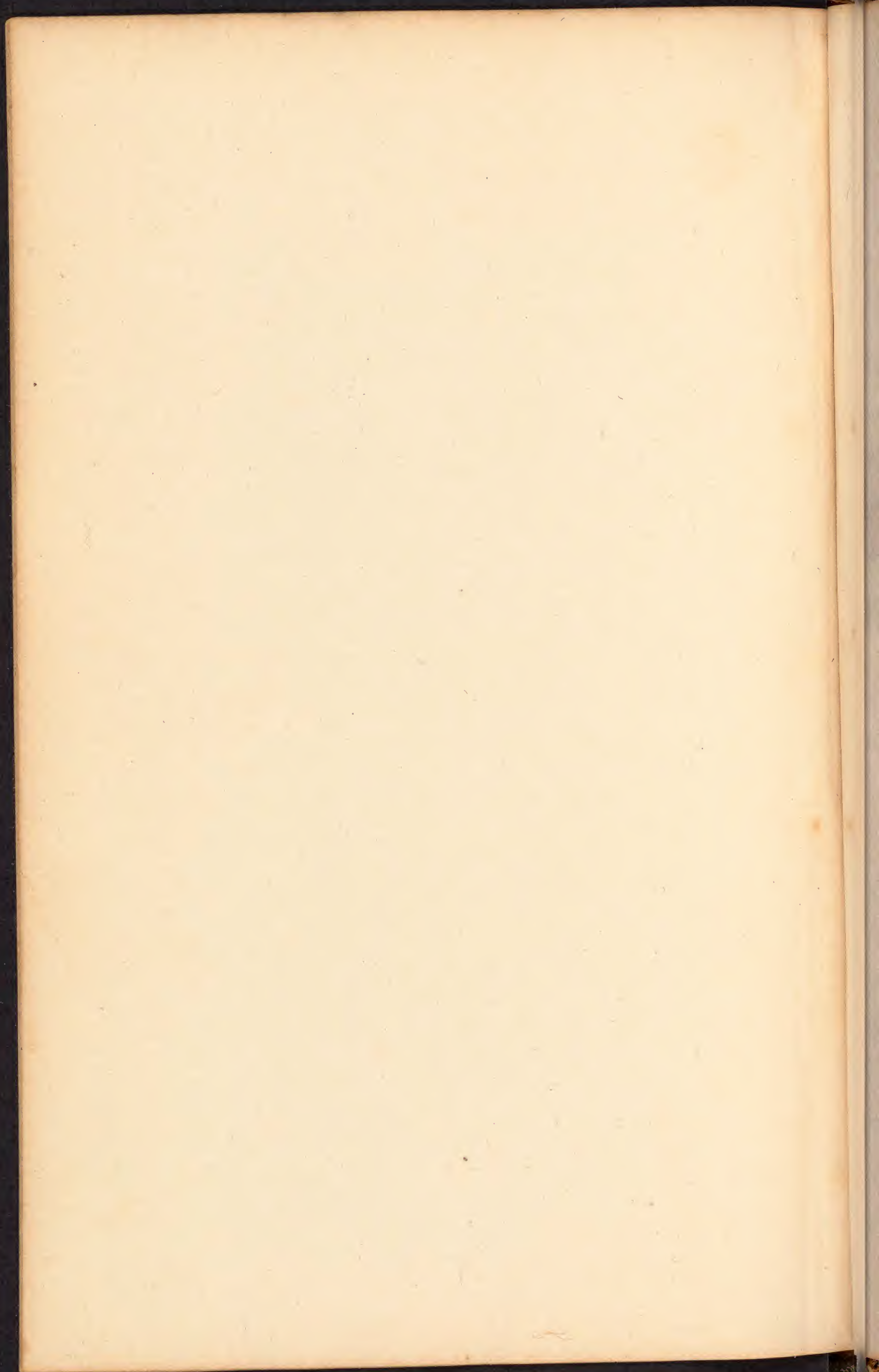


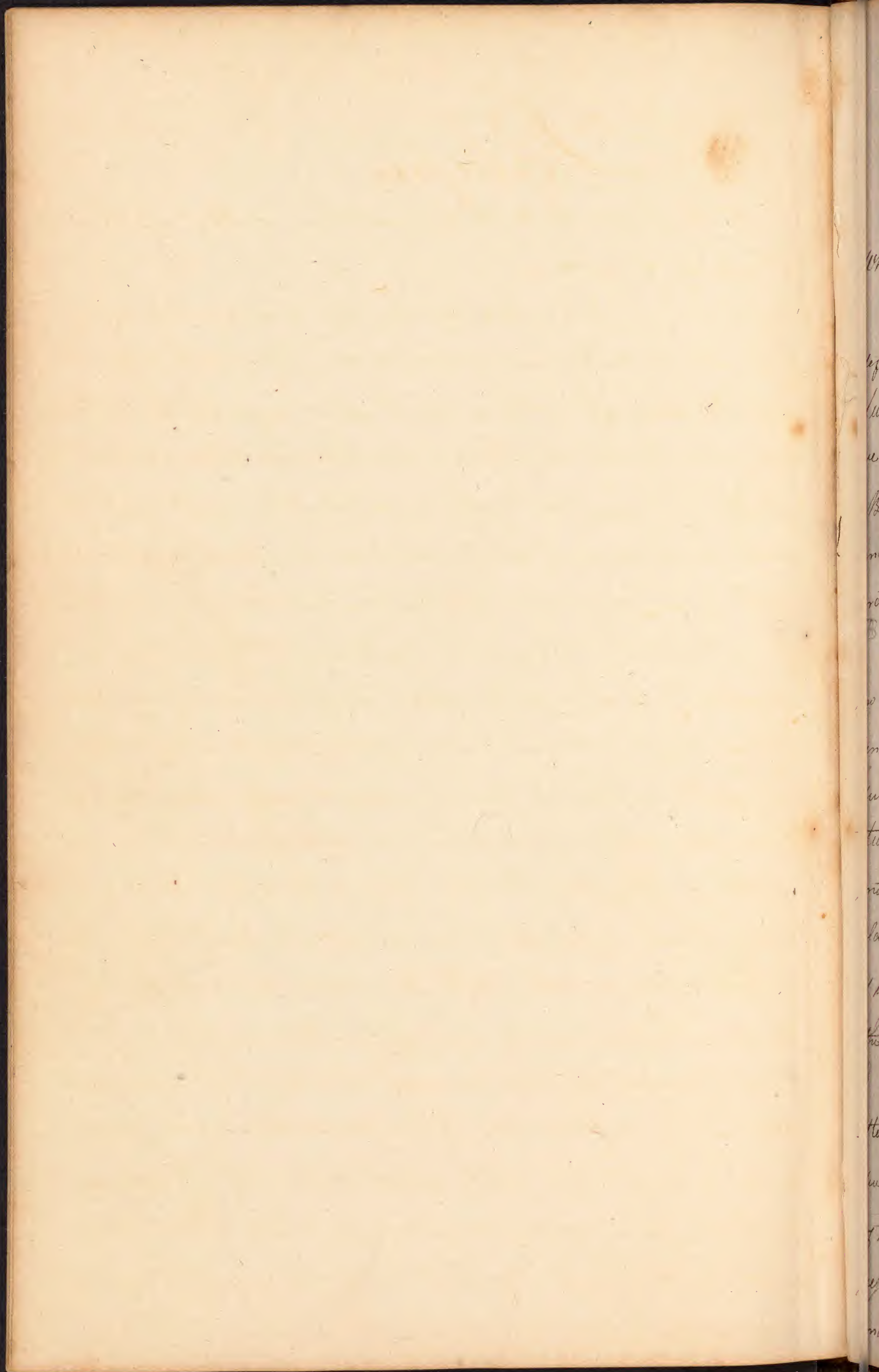












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Pertussis

I proceed next to the consideration of Pertussis or Whooping Cough -

By Nosologists this disease has been defined to be "a convulsive cough, interrupted by a full & sonorous inspiration & returning in fits that are usually terminated in vomiting or expectoration"

Before I proceed to the consideration of its nature and treatment I shall read you Cullens very accurate account of it. (vide Cullens practice) -

As regards the origin of Pertussis I think there is no doubt. It is evidently arises from a specific contagion and as a general rule, never affects individuals but once during their life: To this however there are some exceptions: during the present winter, & indeed within a month I was called to two cases of Pertussis, one an elderly Lady, and the other an elderly Gentleman, both of whom were affected with the disease in early life. The time at which it most generally occurs -

Consulting the various authors that have written on this disease, we find that there is a great diversity of opinion with regards to the seat & nature of it - By some it is said to be seated in the air vessels of the Lungs - by some in the Larynx & Pharynx and by others it has been insisted with no little

De Lunge

who has written a very able treatise on
them enough, his conclusion is that it is
an active inflammation of the mucous
membrane of the Lunge

plausibility, that it is primarily seated in
the elementary canals, and that the Pulmonary sys-
tem is sympathetically affected.

Now as to its pathology is there less difference of
sentiment, for some suppose it to be a spasmodic
affection whilst by others it is represented as exhibiting
all the phenomena of ^{acute} Inflammation. The fact
is, until lately whooping cough has never been well
known - Dissections have never been ^{rarely} made of persons
deceased of this disease, & all the views that were pre-
sented of it, consisted of nothing but speculation
and conjecture. Lately however the subject was
taken up by a very able man, who has added to
all our previous knowledge many of the results of his
enquiries - I allude to Dr Watts a professor of Glasgow
he has made a great number of dissections, and
conducted his work on the subject with great prop-
riety - It would be impossible to detail to
you all his enquiries, but in a page or two he
has compressed the results of his whole experience
He says that the disease is located in the Bronchia,
Trachea, Larynx, & Pharynx, & in the air cells of
the Lungs: that the inflammation is considerable
- that mucus stops up the passage & often causes
death - that sometimes the inflammation pene-
trates below the membranes & kills as in Pneumonia.

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Notwithstanding however, more correct views
have lately been entertained with respect to the whoop-
ing cough. yet I have little that is new to offer
on its treatment — 6

Treatment. — The remedies for this disease are num-
-erous, & hitherto practitioners have applied them empiri-
-cally. being unguided by correct pathological views
of the disease — It is obvious that there are here two lead-
-ing indications, 1st To subdue the violence of the
complaint. 2nd To overcome the habit of perverted
or wrong associations, by which the coughing is kept
up after the disease has been worn out & exhausted.
Taught by dissections the inflammatory nature of
Pertussis we should hardly hesitate to treat the first
stage by direct depletion: in this respect however we
must be regulated by sound discrimination. In case
of a child that is robust, and of a florid countenance
and where there are some febrile action, I should
resort to B's without hesitation — This is especially
demanded by the morbid condition of the circulation
of the Lungs. & I always repeat it throughout all the
stages, as in all other diseases, whenever the symptoms
appear which render it necessary in the first instance.

We are next to employ Emetics — and by common
consent the most active ones are here most recom-
-mended — They act in the first place by determining
from the Lungs to the surface; but they are still

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better by effacing a chain of false associations
by which the disease is kept up - - All who are ac-
-quainted with whooping cough acknowledge the
great efficacy of *Spēcaci* & *Nitri Alb.* combined, in its
treatment - By Dr. Fuhor it is said to be not only an
Emetic but an Antispasmodic, and on this account
he always prescribes it - In order however to obtain
their full power they must be frequently repeated
and especially at the commencement of the disease.
In my practice I often administer them daily
& when there is great oppression at the breast, I give
them even twice in 24 hours -

In the intervals much advantage will be derived
from the same medicine given only in nauseating
doses, as small quantities of *Spēcaci* wine, Antis-
-emetic wine, or a syrup of Squills will answer
very well -

All authors who have written on this disease
lay great stress on the obstinate constipation which
marks its early stage, & indeed it was this that led
to the supposition that it was seated in the Alim-
-entary canal - But all theory aside, it is of great
importance that we should keep the bowels in a
salubrious condition by means of some of the milder
cathartics, as Castor oil, magnesia or Rheubarb
as a constipated condition of the intestines would
not fail to aggravate the complaint is

Handwritten text in a cursive script, likely from a 17th or 18th-century manuscript. The text is written in a single column and appears to be a letter or a formal document. The ink is dark, and the paper shows signs of age, including discoloration and some staining. The handwriting is fluid and characteristic of the period.

Calomel however should always be given, distinct from its cathartic effects, it exercises other valuable powers - No fact is better ascertained than that evacuations from the bowels by Calomel has the effect of breaking down & destroying the force of diseases - It is the practice of many to treat Pertussis exclusively with mercurial purges To this they were led not only by speculations with regard to its propriety, but also by its great efficacy in the hands of a common Empiric of this City: this man had acquired great reputation in curing this complaint and it was at length ascertained that his practice consisted in administering large doses of mercurial purges in its primary stage.

But whilst we are making our impressions upon the disease by a general treatment it is necessary to employ local remedies - Congestion of the Lungs are apt to occur in whooping cough; & these are indicated by symptoms which have been already mentioned - For these & for topical inflammation Blisters are of the highest importance & co-operating to the same ends, & with them is leeches & cups.

Such are the remedies calculated to meet our first indication in this disease - They consist of Voms, Emetics, nauseating doses, active purging with Calomel, & topical remedies as Blisters, Leeches, cups &c - The treatment here laid down is required

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in its full extent only in the most aggravated forms - Don't suppose that is necessary in the majority of cases, for many of them even wear themselves out by being left entirely to nature - It is in the violent & stubborn cases that all these remedies are called into requisition, and after all we are sometimes baffled in our expectations. -

Today it is my duty to enumerate the remedies which are considered as suited to the second stage of Pertussis - In the fluctuation of our practice they have been extremely numerous & diversified, but as they have been hitherto empirically employed it cannot be expected that I shall notice them all. All that I shall do is to repeat generally those which are best adapted to the declining stages of the disease or when we have reason to believe that the inflammation has subsided -

Most of the Narcotics & Antispasmodics have been liberally employed at different times, and among them Opium has not been overlooked. Whatsoever may have been the theories of practitioners, this medicine has been used by them all for the purpose of palliating the most vehement symptoms -

But by a no less respectable authority than Dr Williams it is said to exercise still greater powers in this case. In my own practice however, I have found it to have no other effect than that of calming

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irritation, & for a time suspending the paroxysm of the disease, & this is all you have to expect from Opium in Pertussis.

The Cicuta has also been employed in the cure of this complaint, from the authority of the respectable Dr Butler, who had previously signalized his talents in a work on the Intermittents of Children - It excited for a time no small share of attention, and indeed the writings of that time were replete with instances of the efficacy of Hemlock. Notwithstanding all this however a more careful estimation of the medicine has latterly led to a very general conclusion that it is inadequate to the cure of the disease, and that it will hardly ever silence it - Precisely on the same footing would I place the Henbane, the deadly nightshade, the Digitalis, & all the Narcotics that have been recommended from time to time - They all have the effect of simply calming the irritation, but in this respect are inferior to Opium: and whenever we are called upon to meet this indication we should never omit to employ the latter medicine.

As to the Stannum it may perhaps be an exception to the general rule as laid down with regards to narcotics, from its well attested utility in asthma, a disease which is somewhat similar to the one now under consideration. This however is a mere conjecture of mine as I have never

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employed as the medicine -

Entertaining the hypothesis that Pertussis was merely a spasmodic affection, it was at one time the general habit to treat it altogether with Antispasmodics - All the medicine of this class have been tried in succession, particularly the Castor and the Musk - Of the first of these I know nothing from my own experience, though it has been recommended by a great variety of authors - Cullen however condemns it in the most unqualified manner as altogether destitute of efficacy, & though I do not go so far as him, yet I am disposed to think that it is not a very valuable medicine - His opinion is the same with regard to the Musk - but here I do not agree with him, for determining from my own experience I do not know a better remedy than this article in Pertussis attended with Spasm - The mode of administering it is in Julap, the formula of which you will find in the Dispensatory - But it is a medicine so extremely offensive to children that we often experience great difficulty in using it - To obviate this it has been recommended to administer it per Anus -

But whatever properties the natural musk may possess, they are equalled if not surpassed by the artificial musk - You will learn

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from the Professor of Chemistry the 85
manner in which this is prepared (3iv of nitrous
acid to 3j of oil of amber) - Ever since the time of
Olm Sweeten & Boerhave the powers of the artificial
musk have been well known in Nervous, but it is
only of late that it has been employed in Pertussis. &
to Rufeland we owe its introduction in the treatment
of this complaint - As soon as this practitioner made
known to the public his success with this article it
came to be very generally employed - No medicine
perhaps in the whole Materia Medica possesses a
larger body of evidence in favour of its efficacy
than this: During the last 8 or 10 years the medical jour-
-nals have teemed with instances of its efficacy
and its display of signal powers in whooping cough.

But the highest authority which we have in its
favour is Dr. Bailey, a man who never indiscreetly gives
a medical opinion. After numerous & fair trials with
the medicine he pronounces it the best in this stage
of Pertussis - As yet my experience with the ar-
-tificial musk has been but narrow, but from
the few experiments I have made with it, I am
inclined to think favourably of it - By my med-
-ical friends of this City whose opportunities have
been more frequent than mine, the same flat-
-tering account of it is given - That it is a
powerful Antispasmodic there is no doubt;

5 of oil of Almonds sweeten

or The Tinct of musk is also given
3ij with equal parts of Symplic Alcoh
Dose 5 or 8 drops

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In all the Neurosis I have employed it
and have abundant reason to be satisfied with its
result - On the whole I cannot help recommending
to you in the strongest terms the use of the anto-
-facial muck in this & in all other cases of Spasm-
-odic affections - It is generally given & especially
in whooping cough, in emulsion - The dose is the same
as the natural muck, which is graduated according
to the age of the child from 1 to 5 grains - &c

Of the oil of amber which is an ingredient of the
former much has been said - It is highly extolled
by Underwood who has distinguished himself on the
diseases of children - I can say nothing of it from
my own experience - The dose of it for a child is
from γ to γij drops on a little sugar & mixed in water.

But of all the Antispasmodics, that which
is most generally employed, & which is the most ef-
-ficacious in this disease is the Gum Scutellaria -
Indeed such great confidence is placed in it by
practitioners in this City that it has superseded
the use of all others - The practice of most of
them is, after having procured evacuations by Emetics
mercurial purges, & ss - to prescribe the watery
solution, which is prepared by rubbing down
 Zij of the Gum in Zviij of hot water - dose for a
child a dessert spoonful - -

Handwritten text, likely a letter or document, written in cursive script. The text is extremely faded and illegible due to fading and bleed-through from the reverse side. The document appears to be a formal letter or a legal document, given the structure and the use of capital letters at the beginning of some lines. The text is organized into several paragraphs, with some lines starting with "I" or "We". The paper is aged and shows signs of wear, including stains and discoloration.

The Tonic Medicines have also been much employed in Pertussis - The Peruvian Bark has been highly praised by many Physicians, but by none that it has so strongly recommended as by Dr Cullen, who ranks it above all other medicine in the second stage of the complaint - As Bark possesses such invincible powers in Intermittents and all other periodical diseases it is probable that it may be of service here, but as I have never used it, I must refer you to Cullen you may have confidence in it, for he is the greatest sceptic that ever wrote on the subject of medicine - Throughout the whole of his Medical Education he generally runs up his account of an article by almost a total denunciation of it as a useless or at least a very precarious remedy: when therefore he gives his testimony in favour of a medicine I am accustomed to place as much confidence in it, as in Holy Writ -

Entertaining the same notions with respect to the properties of essence as those of Peruvian Bark - this medicine has also been employed in Pertussis It is most recommended by Simmons & Ferris of Manchester two physicians of great celebrity - From the great activity of the article they use it in small doses, as one or two drops of the solution to a child 2 or 3 years old 3 or 4 times a day

The white natural I think far preferable
to either of these as recommended by
Dr. Fisher - he prescribes it as an
Emetic, than in some cases as antispasmodic.
The blue natural may also be used

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My experience with it is limited - I have however made one or two trials with it, to ascertain whether there was any foundation for the encomiums that have been bestowed upon it - but I have obtained so little benefit from it, that I cannot say any thing in its favour.

In the rage for new remedies the Sacch: Sat: has been lately introduced - The credit of having first employed it is claimed by Dr. Rees, & it is generally conceded to him; but in turning over the works of ^{Savage} ~~Sadler~~ a nosologist - I find that he also used it, for after detailing all the other remedies to be employed in Pertussis he says, "use also the Sacch: Sat: in the dose of ij or iv grs." - After the publication of Rees on the subject, many trials were made with the medicine in Europe - but I do not find that much has been said in its favour.

The last remedy that has been proposed is Nitrate of Silver, on the authority of Dr. Jones - It has been a good deal used, & some cases in which it has effected cures have lately been recorded in the New York medical journals - From my own experience however, I know nothing of it.

I am now to notice some medicine altogether of a different nature - You may remember that I told you a few days ago, that the Alkalies for some time past had been favourite remedies in this disease - The credit of introducing them is due

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to Person of London - & I being much pleased
with the result of his practice which I witnessed
took down his prescription & brought it with me
to this country - It is as follows -

Rx Carb: of Soda ————— gr iij
Min: Ipecac: ————— 5 drops
Laudanum — — — 1 drop
Water ————— ℥j

To be given to a child every 2 hours -

Of late it has been a general practice to emp-
-loy a combination of vegetable alkali & cochneals
of this I knew nothing from experience, but it
seems to have superseded all other modes of fusing
the alkalis - It is thus prepared -

Rx - Carb: of Potash ————— ℥j
Cochneals ————— gr x
Water — — — — — ℥iv

Mix them together & sweeten with loaf sugar - the
dose of this for a child of 5 years old is a desert spoon
full 5 or 6 times a day -

My experience now with the Alkalies in
this disease is sufficient to authorize me to prom-
-ounce upon their success, & it is my deliberate
opinion that they are entitled to the greatest
attention, & that they are undoubtedly productive
of the most salutary impressions - To this point
we not only have the concurrent testimony

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of many distinguished practitioners, but
the popular voice is raised high in their favour.

But in order to obtain their powers they must
be given in much larger quantities than recom-
-mended in the prescriptions I have just re-
-lated to you, for these will be productive of little
or no effect - Indeed it was owing to the cir-
-cumstance of my prescribing them in small doses, that
I once distrusted them - But since I have doubled
my doses I have entirely regained my confidence
in them -

As to the comparative utility of the two
alkalies I am unable to give my opinion - Lately
the potash has been generally used by practitioners
but I do not know that we have any reason to
suppose that it is in any respect superior to the
Soda - As to the *modus operandi* of the alkalies
in this disease it is not very intelligible to us -
By some their efficacy is said to depend upon
their power of correcting the acridordes in the
alimentary canal - That accumulations of faecal
matter in the Intestines & Stomach, occasioning ir-
-ritation in those parts, do produce coughing
from a sympathetic affection of the Lungs, there
is no doubt, as I have seen it exemplified in
at least 100 cases - It would seem probable there-
-fore that this was their *modus operandi*,

The first thing I noticed when I
opened the door to the old library was
a cold draft of air, but as I stepped
in, the warmth of the room enveloped me.
The shelves were tall and narrow, filled
with books of various sizes and colors.
The spines of the books were worn and
discolored, but the titles were still legible.
I walked down the aisles, my feet
making a soft sound on the wooden floor.
The light was dim, coming from a few
lamps hanging from the ceiling. The air
was thick with the scent of old paper and
dust. I reached the end of the aisle and
stopped, looking up at the ceiling. The
wooden beams were dark and polished.
A small chandelier hung from the center,
its light casting a warm glow. I turned
back and looked at the books. Some were
old and some were new. The titles were
in various languages, but I recognized
many of them. I walked back to the
entrance and opened the door. The cold
draft was still there, but the warmth of
the room was still with me.

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There is however no necessity for resorting to this chemical solution of the problem, for they exert a powerful agency upon the system as is exemplified in periodical diseases - I mentioned to you in a former Lecture the great efficacy of a few grains of Soda or Potash in Intermittent fevers when combined with Serpentina & Peruvian Bark - - as in these the operation of the alkalis is precisely the same - In both cases they produce a powerful impression upon the stomach & whole system, by which the chain of morbid associations, upon which the disease depends is interrupted & terminated.

I have said that the credit of having first introduced the alkalis in the treatment of Pyloritis was due to Pearson, but it has rather been conceded to him for in Hufeland's journals we find that they have been employed in this disease from time immemorial in Germany -

Leaving the consideration of the alkalis I am next to make some remarks on a medicine that has acquired a considerable share of reputation in this complaint - I allude to the Tinct. of Cantharides It has long been known to be a popular remedy in England; but the attention of practitioners was not particularly directed to it until about 25 years ago. The credit of having brought it into notice is ascribed to be given to Lettsome - this mode

Dr. Lhynch says that the only
way to arrest the progress of the disease
is to induce a slight strangury
but it must be limited.
It seems to act by resolution

+ a new remedy I have just heard
is the essence of hot tea - It is said
to promote expectoration - nothing more
is necessary than to introduce a hot paper
into a cup of tea which will follow
the above instructions -
Dr. Lhynch has been recommended
on the same principle -
Expectorant applications also are said
to be of use - I think is far better
on the whole

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was to give it in the quantity of a few drops diluted with sweetened water - He tells us that even when it occasions no sensible effect, it is notwithstanding productive of benefit - but he says in order to render its effects it should be pushed so far as to occasion a slight degree of strangury thus he observes always suspends the disease, and several repetitions of it will completely extinguish it - But this practitioner is not the only one by whom the Linctus of Cantharides is recommended, for by many others it is highly extolled - As to myself however I can say nothing of it, neither do I know if it is employed in this City; but as it comes recommended to us by very respectable authority I deemed it my duty to call your attention to it.

I have now gone through the remedies that have been considered as best adapted to the second stage of Pertussis - many of them however are perhaps entitled to little or no attention, but as in morals it is as useful to display evil as to point out good - so it is with regard to medicine - Nothing can be more advantageous to a Physician in practice than to be well acquainted with the dangers that encompass him, when he is presented with a crowd of remedies & instructed with regard to their various effects & comparative efficacy, then he will be enabled to avoid evils, & do good -

B

Recapitulation -- From what has been said in this & the last lecture, you have probably been enabled to collect my own practice in this disease. I shall recapitulate the whole in a few words. Believing that Pertussis is at first an inflammatory affection, I first employ those remedies which are adapted to diseases of that nature, as Ops, mercurial Prizes, and when by this Inflammation great accumulations of Phlegm are produced in the Bronchia and air cells of the Lungs, I then give Emetics, these should be frequently repeated, & in the interval nauseating doses of Emetics should be given from time to time. In the next place should the child be exceedingly oppressed by the Inflammation of the Lungs, I apply a large Blister to the breast, & sometimes Leeches & cups - and as a palliative to the violence of the cough I prescribe Opium, when the crisis of the disease is gone, or when the Inflammation has completely subsided, then decidedly the best remedies are the Alkalies, & the watery solution of Asafetida - But whilst we are pursuing our remedial treatment a consideration of the greatest moment is in the Diet, change of air, &c The diet of the patient should be strictly attended to, and properly regulated, as being in the first place an Inflammation, the patient should during the first stage of the disease subsist wholly on vegetable food.

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Partial view of the adjacent page on the right, showing handwritten text and some binding details.

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never at any time to be allowed animal food. Hardly less attention should be paid to the clothing of the child: this should be warmer than usual - nor should we neglect the utility of an equal temperature in inflammation: this is of the utmost importance in diseases of the chest, and during the inflammatory stages of Pertussis is

But the inflammation being over the patient must always be freely exposed to the air, of all our remedies, none can so effectually eradicate the disease as a change of air, but from poverty or other circumstances, the patient cannot sometimes be carried into the country - we must then substitute frequent riding in

I have dwelt thus long on Pertussis because there are few cases of disease that will so often perplex you - or so frequently prove fatal as this - Cholera Infantum & Pertussis occasion a greater expenditure of life, & make greater miseries into domestic happiness than all the other Infantine diseases put together

VOL. III

Asthma

As alluded in some respects to the disease of which we have been treating I proceed next to deliver an account of Asthma. This disease has most commonly been considered as a spasmodic affection of the Lungs which comes on by paroxysms, sometimes very regularly at stated intervals, though perhaps most generally it does not observe very strictly the law of periodical recurrence. There are indeed wide deviations as regards the return of the paroxysm - Cases are recorded in which the attack comes on daily, weekly, monthly, annually, & even at more distant periods as twice for example in the course of a long life -

The causes are either such as act directly on the Lungs, or such as act indirectly through the medium of the general system - Of the first set of causes are certain acrid matters inhaled, as the vapours from Lead, Arsenic, mercury or other metals. Also pungent odours, as strong perfumes or fetid smells, produced by a great number of substances - It is a curious fact that

the odour arising from *Speccanthea*³
which as I shall hereafter mention is high-
ly beneficial as a remedy in this complaint
sometimes brings on a paroxysm of Asthma.
I knew a student of the late Dr. Bartolin
who could not reach out the medicine with-
out inducing an attack. Once in looking
over an early volume of the transactions
of the Royal Society in London I met with
a case precisely of the same nature.

To these causes we may add the variable
gases, as Carbonic acid gas in particular -
and different states of the atmosphere as regards
either its sensible or insensible qualities as
excessive heat or cold, moisture or dryness -
with some accidental peculiarities with which
we are not exactly acquainted. Thus the
air of the country and suburbs is much more
purifying than that of the city, and cities
apparently under similar circumstances dif-
fer materially in this respect as is strikingly
illustrated by Baltimore and Philadelphia.
It is said that the air of Baltimore peculiarly
predisposes to the asthmatic affections, and
I have known several individuals coming
from that city to Philadelphia to be consider-
ably benefitted by the change of air.

These are the causes which act
primarily on the Lungs - but as I before
stated there are some which secondarily
affect this organ - Of these may be traces
wrong impressions on the alimentary canal
made by warming, indigestible foods, from long
fasting or repletion, from excess in eating
or drinking, and constipation of the bowels.
Among the causes may also be stated a sup-
-pression of any natural or accustomed
discharge, retrocession of eruptions, and
metastasis of disease, & the indulgence of
violent passions - Most generally however
the circumstances enumerated are merely
exciting causes, acting on a disposition der-
-ived by inheritance, or arising from pecu-
-liar conformation of the chest and thus
awakening the disease into existence -

But whatever induces a paroxysm it very
commonly commences in the evening or after
the first sleep, with a sense of tightness
or stricture across the chest, & with impeded
respiration - there is either no cough at all
or if this occur it is unattended with exp-
-ectoration - the patient if in a horizontal
posture is under the necessity of raising him-
-self erect & approaches for relief to the

open windpipe: - the difficulty of breathing
is found to increase. & inspiration & expiration
are performed with a wheezing noise - the
voice is weak, & the exertion of talking more
or less painful. After these symptoms have
continued for a few hours, perspiration
breaks out, respiration becomes less labo-
rizing, the cough which in the commencem-
ent was without expectoration becomes more
free, and a greater or less expectoration of
mucus takes place, and all the other un-
pleasant affections are alleviated. There is
less tension across the breast, & less difficulty
of respiration towards midnight. Every
night the same symptoms recur and are
removed again towards morning -

After the disease has thus continued for
several days the expectoration becomes more
copious, and the paroxysm ceases altogether.
The pulse throughout the case is for the most
part quick and small, though it is sometimes
not at all affected. The urine at the com-
-mencement of the paroxysm is pellucid &
in the remission is high coloured, & often
deposits a latitious sediment. The face
during the paroxysm is often flushed
and turgid, but it is as often pale & shrunk

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Asthma is a periodical disease, not often occurring before the age of puberty, and attacks the male more frequently than the female sex - it is most liable to occur in wet weather, but this is not uniformly the case - The paroxysm is often succeeded by lassitude, torpor, heaviness, lightness and pain in the head, & many symptoms of vertigo -

As regards the Pathology of this disease very little apprehended is clearly understood. By Cullen and most of the modern writers it is supposed to consist in a spasmodic constriction of the muscular fibres of the bronchia, which interrupts respiration, and gives rise to the other distressing symptoms attendant to the case. But a very late writer (Bree) who has treated on this subject not without ability has attempted to overthrow this doctrine - though I think unsuccessfully - He is contended by him that the leading and most common form of the complaint is caused by irritation applied to the air cells, either by Quins, or accumulation of the effusions of Serum -

As yet dissections have not thrown much light on the disease - In cases

This image shows a blank, aged, cream-colored page, likely an endpaper or flyleaf of a book. The paper has a slightly textured appearance with some minor discoloration and a dark horizontal crease near the bottom edge. A small dark spot is visible near the top center. The page is set against a dark background.

of sudden death or where the complaint
has not long existed the Lungs appear on
examination in a perfectly healthy condition
But in very old and protracted Asthma's
we are told by Morgagni that the parts
show evident marks of morbid action, &
this circumstance is corroborated by the
well known fact that Asthma sometimes
induces Pneumonic inflammation, or runs
into Hydrothorax or Pulmonary Consumption.

On the whole it appears highly probable to me
that Asthma is really a disease of the Lungs
attacking in shape of Spasm, and that the inf-
lamination and effusion, and other morbid
phenomena occur only as consequences or mere
effects of the preceding disease. But at the
same time it must be admitted that the
spasm to which I allude is often only sec-
-ondary in its nature, arising from various
sources of irritation, but most generally
originating in the stomach and bowels.

The ordinary division of Asthma is
into Spasmodic & Humeral - the one dry
and the other attended with pituitary
expectorations. The first is the most
common form of the disease in the early
and the second in the advanced stages of life.

Whether the peculiarity is sufficiently uniform to warrant the distinction into two cases I am not prepared to say - but in practice this point needs not be regarded.

Each form has repeatedly come under my notice, & I have found that they are both to be managed on the same general principle, only adapting the remedy to the circumstances of the system connected with the disease. It appears to me a much more correct division would be into Idiopathic & Symptomatic, because most unquestionably the disease does exist in both these shapes. But whatever may be the pathological view entertained with regard to the disease, the treatment divides itself into that which is proper during the paroxysm, and that which is suited to eradicate the disease & prevent its recurrence, —

A practitioner merely looking at the prominent symptoms of this disease would hesitate for a moment as to the propriety of b.p.s. It seems to be called for by the interrupted circulation through the lungs indicated by the difficulty of respiration the suffused & tumid countenance, and

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a variety of other circumstances —
But still it is universally confessed that
this remedy is exceedingly ambiguous, and
while by many it is utterly condemned
even those who are in the habit of recurring
to it allow that the advantages secured are
not at all commensurate with what might
be anticipated from the symptoms. It is
however my settled conviction that though
the Lancet is not generally required to a
great extent, yet in the more violent forms
of the disease it is useful and sometimes
even indispensable. Nevertheless I wish
you to recollect that I recommend the
remedy only in plethoric cases of the disease
and when the attack is vehement and of
short duration. Under such circumstances
it undoubtedly prevents that organic in-
jury of the Lungs which lays the founda-
tion for Hydatidæ, & Pulmonary Consump-
tion. In determining on the propriety
of the practice in this disease we are
not to confide in the indications of
the pulse, as this in many cases is very
slightly if at all affected. But we must
take into view all the circumstances of
the case, particularly those already mentioned

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as apparently calling for the remedy - 17
Cases do however often occur where life is
certainly inadmissible, & would not prove
of any utility, though there may be present
no inconsiderable degree of congestion in the
Lungs - It is exactly in this state of things
that topical depletion by cups to the back is
indicated, & may be most beneficially em-
ployed -

4 Of the efficacy of Emetics in a paroxysm
of asthma, infinitely less difference of opinion
prevails than as regards the two former modes
of evacuation - But these are objected to by
some as hazardous and altogether useless, this
objection has always seemed to me to be
exceedingly frivolous, & so far has it been
from influencing my practice that I almost
always prescribe Emetics - As regards the
nature of the case whether spasmodic or
Humoral there is no difference in the ad-
ministration of the remedy - Most generally
under every circumstance of the disease, vom-
iting causes a relief of the paroxysm, & if
timely resorted to sometimes prevents
its return - - Ipecac is commonly
preferred over all other articles - As
far as I know the practice ^{of using it} originates

with Beside the Facts and Physician 19
-at least an excellent paper was written by
him on the subject, & may be found in the
transactions of the London College of Physicians
During the paroxysm of the disease he admin-
-istered \mathfrak{z} of Speccac: in order to effect
immediate relief, & in the intermission
from 3 to 5 grs every morning to excite nau-
-sea & effectually to remove the complaint
When Speccac: is given in these small doses
whether it produces vomiting or not, it is
equally beneficial.

It is right perhaps for me to mention
that Cullen and most other authors who have
followed him differ from me as to the equal
propriety of Emetics in the several species
of Asthma. It is said by this writer that
though vomiting is very beneficial in the
pituitary or humeral, it is of no avail
in the spasmodic, & is sometimes even
mischievous. To this I will only answer
that from my own experience I have
been led to an opposite practice, and
have found vomiting just as serviceable
in one as in the other form of the complaint
Do we not administer emetics to remove
spasms in Cynanche Tachycalis, and are

and a statement of the facts and circumstances
of the case as presented by the parties
and the evidence in support of their claims
and defenses. The statement of the facts
should be clear and concise, and should
include all the material facts of the case.
The statement of the evidence should be
clear and concise, and should include all
the material evidence in support of the
claims and defenses. The statement of the
law should be clear and concise, and should
include all the material law applicable to
the case.

The statement of the facts should be
clear and concise, and should include all
the material facts of the case. The
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the material evidence in support of the
claims and defenses. The statement of the
law should be clear and concise, and should
include all the material law applicable to
the case.

not the effects of the remedy, must bene- 21
-ficial; why should we not in Asthma
arising from spasm recur to the same rem-
-edy? But on this you may implicitly rely
that as far as my experience ~~has~~ extended
emetics may be not only safely, but also
usefully employed in the Spasmodic as
well as the Humoral species of this disease.
By some practitioners the Squills is greatly pre-
-ferred in this case. It is not at all unlikely
that this article is well suited to the disease
and especially when it occurs in old people
whose Lungs are torpid and loaded with
phlegm, & that they may be relieved, require
an Emetic active and stimulating. - Much
also has been said of a combination of Spicas;
and Squills, which has been reported to be
vastly superior to either of these medicines
alone. - but of this I cannot speak from
actual experience. Emetics in nauseating
doses are by some preferred to active vomiting
while others on the contrary adopt the latter
mode, & which of the two is the better practice
has not been accurately determined. - On
this point I have long made up my mind
to me it is manifest that as in all other
cases one or the other should be adopted,

Handwritten text, likely a letter or document, written in cursive script. The text is faint and mostly illegible due to fading and bleed-through from the reverse side. The page contains approximately 25 lines of text. There are two small, dark, irregular marks or stains on the page: one near the top center and another near the bottom left.

according to the circumstances of the disease. To break down an attack, vomiting is infinitely more powerful, and should never be neglected, but with a view to the promotion of expectoration, nauseating doses are among the best means in the management of asthma. Commonly Speccac: is administered for the purpose and is exceedingly efficacious. But in cases of old people in whom there is much atony of the Lungs, the more stimulating expectorants are demanded, as Squill Gum Ammoniac, the Seneca Snake Root, and Rab: Alkali. - Not the least efficacious of the stimulating expectorants is a combination of Lac Ammoniac with Nitric Acid. Prepare the milk of Gum Ammoniac ʒviij according to the formula given in the Dispensatories, & pour this gradually on ʒij of Nitric Acid, stirring the mixture in a mortar all the time. It is also beneficial in some cases to add from ʒss to ʒj of Paragoric. The dose is a table spoon full every hour or two according to circumstances. - From this preparation great utility has been derived. -

As might be expected from the known effect of Purges in the

Pulmonary complaints, they are entitled
to little confidence in Asthma - On the
contrary they are productive of injury if used
to any extent - It is however important
that the bowels in the commencement should
be freely evacuated & afterwards kept in
a soluble condition, as the disease is in
some cases considerably aggravated & even
produced by constipation. Nothing would
appear more reasonable to a person consid-
ering the symptoms of Asthma than that
Opium would be serviceable in this
complaint, accordingly it has been liberally
employed and with very opposite results.
It has lately been said by Dr Bree that Opium
is uniformly hurtful, and such is by no
means a rare opinion though it is not univer-
sally entertained by practitioners. The truth is
that the effects of the remedy is not the same
in the different stages, being always mischievous
in the commencement of the disease or when
this is at its height, but after the disease
has been reduced by the active means already
detected, Opium is productive of great advan-
tages I am persuaded from my own obser-
vation. We should never confide the treatment
of Asthma to Opium alone.

Every article belonging to this class of 27
remedies, the Narcotics & Antispasmodics have
been successfully employed, simple and
variously combined. What was said on
the effects of Opium is equally applicable
to the whole of these medicines with this
difference, that they are all inferior to that
article in efficacy. It is right however
that I should make an exception in favour
of one of them. I allude to the *Thammonium*
which of late years has gained great reputa-
-tion as a palliative of Asthma. The root
of the plant is the part employed. Having
been previously washed, dried and bruised
it is to be smoked in a pipe like common
tobacco. That the *Thammonium* thus em-
-ployed occasionally affords relief cannot
be doubted. I have myself witnessed many
cases in my own practice, & its efficacy is
abundantly attested by practitioners both
in Europe and America. But like other
remedies it often fails, and perhaps we
shall never be able exactly to ascertain un-
-der what circumstances it may be given
with any certainty of success. It would seem
however determining from my own ex-
-perience best suited to dry or Spasmodic Asthma.

- but after all whether Stramonium is
 is superior to tobacco used in the same way
 is very questionable. More than once I have
 known relief afforded by a segar, though at
 other times it has aggravated the disease - I
 have never seen any of the violent & fatal
 effects of Stramonium which are alleged
 by some authors of Europe, who depreciate
 the article - In the management of the dis-
 ease under consideration, no remedy would
 appear to promise more than Blisters to
 the chest, but actual experience does not
 realize this anticipation in any great degree,
 and there are not wanting some who dis-
 credit entirely the utility of the application.

My own observation of the effects of the
 remedy does not allow me to concur in such
 unqualified censure, though it has so often
 disappointed me that I am not inclined to
 repose in it any great share of confidence -

It is asserted that incomparable more
 benefit is derived from Blisters to the
 extremities, & in some cases when thus ap-
 plied, to use the language of Dr Rush
 they operate like a charm -

As Blisters to the seat of the complaint
 are (at least alleged to be) of such doubtful

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utility it will be right to substitute 31
some other resuscitating application and
particularly the plaster now prepared of
Emetic Tartar. To the employment of this
remedy we are encouraged by its astonishing
effects in some of the pulmonary affections
particularly Angina Pectoris a complaint so
analogous to some forms of Asthma.

During the paroxysm relief is sometimes
procured by draughts of intensely cold water
in other cases by hot water, and in others
by Beer and very strong coffee. Exposure
to cold is also beneficial, and sitting near a
fire with the feet exposed to it is still more
so. Do not be surprised at my mentioning
such opposite remedies - this is not the only
disease in which measures diametrically
opposite are found beneficial, & in which
we must entirely submit to experience
as our guide. It may be hurtful to the
pride of ^{our} science, though it is indisputably
true that we are often, in the treatment of
diseases compelled to throw all our prin-
ciples behind us and submit to the dic-
tates of experience in the true spirit of
genuine empiricism.

Handwritten text, likely a letter or document, written in cursive script. The text is extremely faded and illegible across the entire page.

The inhalation of vapour is well calcu- 38
-lated to relieve the Lungs and sometimes may
be resorted to with obvious advantage - even
the steam of water is not without utility
though it is rendered infinitely more ef-
-ficacious by impregnation with some of
those articles mentioned under the head of
Peripneumony Mithra.

At one period in the reign of Pneumatic
medicine it was fashionable to use gases
or factitious air in the paroxysm of this dis-
-ease, & by Dr Beccles, Thornton, and other
authors they were extravagantly extolled -
by Dr Beccles we are told that the effects of
oxygen is altogether miraculous - The moment
it is inspired the livid colour of the coun-
-tenance disappears, the laborious respiration
ceases, and the functions of all the Thoracic
organs go on easily & pleasantly again - but
subsequent and more enlarged experience
has shown that no benefit is derived from
oxygen or any of the respirable gases alone
or diluted with atmospheric air, & that prac-
-tice like many other fooleries after having
engaged an ephemeral existence is dead
and gone to the tomb of the caput.

The first part of the book is devoted to a general
history of the world, from the beginning of
time to the present day. It is written in a
clear and concise style, and is well
illustrated with numerous maps and
diagrams. The second part of the book
contains a detailed account of the
history of the British Empire, from the
time of the Romans to the present day.
It is written in a similar style to the first
part, and is also well illustrated with
maps and diagrams. The third part of
the book is devoted to a history of the
British Empire in the East Indies, from
the time of the Portuguese to the present
day. It is written in a similar style to the
other parts, and is also well illustrated
with maps and diagrams. The fourth part
of the book is devoted to a history of the
British Empire in the East Indies, from
the time of the Portuguese to the present
day. It is written in a similar style to the
other parts, and is also well illustrated
with maps and diagrams. The fifth part
of the book is devoted to a history of the
British Empire in the East Indies, from
the time of the Portuguese to the present
day. It is written in a similar style to the
other parts, and is also well illustrated
with maps and diagrams. The sixth part
of the book is devoted to a history of the
British Empire in the East Indies, from
the time of the Portuguese to the present
day. It is written in a similar style to the
other parts, and is also well illustrated
with maps and diagrams. The seventh part
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day. It is written in a similar style to the
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with maps and diagrams. The eighth part
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day. It is written in a similar style to the
other parts, and is also well illustrated
with maps and diagrams. The ninth part
of the book is devoted to a history of the
British Empire in the East Indies, from
the time of the Portuguese to the present
day. It is written in a similar style to the
other parts, and is also well illustrated
with maps and diagrams. The tenth part
of the book is devoted to a history of the
British Empire in the East Indies, from
the time of the Portuguese to the present
day. It is written in a similar style to the
other parts, and is also well illustrated
with maps and diagrams.

In the last lecture I brought to a 35
conclusion the history of the remedial proper
to be employed in a paroxysm of Asthma
But to eradicate the disease another course of
treatment should be pursued. As it commonly
appears, the most effectual remedy in the
case is the various Tonics - It was formerly
remarked by me that the alimentary canal
is generally disordered. When this happens the
management is precisely the same as in
Dyspepsia. Most of the remedies used in
the last case will be found equally effectual
in Asthma, & particularly the Chalybeate
preparations when employed at an early period.
But this is the least difficult form of the
disease and the one requiring the most simple
remedies. It often happens that long after the
paroxysm is over, Dyspepsia, cough and other
pulmonary symptoms continue and threaten
serious consequences. These are occasioned
for the most part by effusions of Serum, &
some organic injury in the Lungs. It is
under such circumstances that Diuretics
seem eminently serviceable, such as Squills
Digitalis, Seneca, alone or in union with
small portions of Calomel - Much a little
advantage may also be derived from the

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habitual use of Garlic as is attested
by many Physicians, and I am persuaded
that one of our best remedies is common Salt,
exhibited freely in form of a pill - These
two articles Garlic & Salt in domestic practice
are generally employed together, & have
deservedly acquired much public confi-
-dence -

To these I shall add one other remedy
viz the Myrrh - This is beneficial by itself though
its powers are enhanced by union with Peruvian
Bark or some other vegetable bitter or aromatic
article - As the stomach in this case is a good
deal affected it is obviously requisite that the
diet should be strictly regulated even where
there are no gastric symptoms - No trespass
in eating or drinking should ever be comm-
-itted, and much care is necessary to guard
against the vicissitudes of the weather by
warm clothing, & especially by wearing flann-
-el next the skin - It is universally adm-
-itted that exercise and even labour is very
beneficial in the eradication of Asthma.
Long journeys frequently remove it, and
contrary to what might be expected it
is sometimes attained by the exhaustion
and fatigue of a military life -

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To this point we have the testimony
of almost all the writers on the subject.
During the late year when a large proportion
of the population of this City turned out
for its defence, & remained encamped for
several months, two or three of my personal
friends who had been victims to the Asthma
a great part of their lives were completely
cured by the fatigue and hardships they
endured. All these means however fail-
-ling you should recommend a change
in the place of residence - the exact sit-
-uation must be determined by the expe-
-rience of the patient himself - It some-
-times happens that a very moist atmos-
-phere is most beneficial to Asthmatic
people - and sometimes on the contrary
the driest situation is best adapted
to their health and comfort

D

Handwritten text in a cursive script, likely from a 17th or 18th-century manuscript. The text is written in a single column and appears to be a letter or a formal document. The ink is dark, and the paper shows signs of age and wear.

Handwritten text in a cursive script, likely from a 17th or 18th-century manuscript. The text is written in a single column and appears to be a letter or a formal document. The ink is dark, and the paper shows signs of age and wear.

Angina Pectoris

This is a new disease having been described for the first time by the celebrated Dr. Hecquard about half a century ago. It is of rare occurrence so much so indeed that doubts have been entertained whether it really exists as described by those who have seen most of it.

The disease presents the following symptoms. A person is seized while fatigued with walking or some other exertion, with a painful sensation at the sternum, extending to one or both arms, at first no farther than the insertion of the Deltoid muscle, but afterwards to the elbow, the wrists, & even to the fingers.

As soon as the patient remains still, all uneasiness vanishes, but when the disease has continued for some time and becomes confirmed this does not so completely take place. The pain under these circumstances will come on while the patient is in a state of rest in bed, & will be excited by coughing, by speaking loud, by straining at stool, or by any mental affection. - but for the most

History of the

The history of the city of London, from the first settlement of the Britons, to the present time. The first part of the history, from the first settlement of the Britons, to the reign of King Henry II. is contained in the first volume. The second part, from the reign of King Henry II. to the reign of King Henry VIII. is contained in the second volume. The third part, from the reign of King Henry VIII. to the reign of King Charles II. is contained in the third volume. The fourth part, from the reign of King Charles II. to the present time, is contained in the fourth volume.

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common exciting cause is ascending a flight of stairs, or a hill, or any other height inducing a disturbance in the circulation and this is most apt to occur when the stomach is full. To this uneasiness already mentioned in the Sternum and superior extremities may be added in cases of more violence, great anxiety, palpitation of the heart, laboured respiration, and a sense of suffocation with many other distressing affections which appear to threaten the immediate extinction of life. As a general rule Angina Pectoris selects for its subjects the middle aged, & men more generally than women, & persons robust and corpulent with short necks, & those who are habitually indolent & sedentary and often the faulty.

In relation to the Pathology of this disease we know nothing which is at all satisfactory. It was generally believed by the early writers on the subject to be spasmodic in its nature, though the part immediately affected was not designated or understood. This opinion was rendered probable by the general complexion of the case, by its causes, symptoms, & cure, & by its analogy to the disease confessed to be of a spasmodic nature as the Asthma.

So close is its resemblance to this complaint
that it was called by Dr Darwin, *Asthma Dolorifica*.
But within the last few years it has been
attempted to be shown by Dr Parry that it is a
species of syncope, denominated by him
Syncope Anginosa, arising from, as he alleges
ossification of the coronary vessels. To this
opinion it may be objected that there is no
necessary connection between what he consi-
dered the effects and the cause, - That
ossification of the vessels of the heart must
be productive of great disturbance to the
animal economy is without doubt, but
I shall never be prevailed to believe that
the agony and distress of *Angina Pectoris*
are consequences of any derangement in these
vessels - Completely to refute the hypothesis
all that is necessary is to mention that several
cases of *Angina Pectoris* have occurred in
which after death, dissections have brought
to light no diseased appearance about the
heart, & even when ossification has existed
Angina Pectoris in many instances has
been absent. - By a writer of our country
(Dr Hosack) it is contended that the com-
plaint consists in plethora of the blood
vessels, particularly in accumulations of blood

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[The text on the right margin of the adjacent page is also illegible due to fading.]

in the heart and large arteries - As I do not consider this opinion better founded than the preceding I shall not enter into a detail of the facts adduced in support of his doctrine. It is sufficient for my present purpose to observe that on the fullness & regain of the circulation he founded his hypothesis, which I am not disposed to admit, having met with the disease in cases of extreme debility and emaciation - This fullness and increase in the circulation I take to be the effect rather than the cause of the complaint - So we not find that such a state of the heart and large vessels exists without inducing any symptoms of Angina Pectoris - If mere fullness of the vessels was cause of the complaint as is all-eged by the author alluded to, we should find it to occur as often as this fullness and increase of the circulation takes place.

Notwithstanding the number of dissections of Angina Pectoris, not much light has yet been shed on it - This is owing to the great diversity of the phenomena presented, no two cases being exactly alike - It is said that sometimes no morbid appearances whatever can be traced in any part of the body most generally however the heart is diseased

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ly of size, enlargement, dilatation of - 49
- fusion in the pericardium, or large depositions
of adipose matter - But in other instances
morbid phenomena are found in other parts
the heart being perfectly healthy - as water in the
chest, membranous adhesions of the Lungs, abscess
in the mesenterium, aneurysms & other
diseases of the Liver, and the rest of the chylopo-
-etic viscera - In one case all the phenomena
arose from schirrus of the Pylorus - My
impression on the whole is that the Har-
nach is the seat of the disease from which it is
extended through the medium of sympathy to
the pulmonary organs, & that in its nature
it is generally arthritic or Gouty. To this con-
-clusion I am led by the consideration of the
causes, mode of attack, symptoms, cure, ap-
-pearances on dissection, and particularly by
the fact that all the cases which have come
under my notice have ultimately turned
out to be Gout - My time will not al-
low me to permit me to enter into a minute
description of my opinion, nor is it required
as no new course of practice is suggested
by it - But I will relate to you a few
cases which have occurred to me and leave
you to draw your own conclusions. S

1st There was a gentleman in this city who for 20 or 30 years was supposed by his physicians to labour under Angina Pectoris. The symptoms were all strongly marked - after the death of Dr Rush I was called in consultation to the gentleman in an attack of what was considered Angina Pectoris. Believing however it was really a case of Gout I recommended the attending physician to treat it according to Robt. Alkali was given internally & leeches applied to the extremities - In the course of two or three hours a complete attack of Podagra came on which after continuing for 3 or 4 hours in a single second receded from the feet to the heart, and terminated the life of the individual. This case afforded strong testimony in favour of my hypothesis, though it terminated unhappily.

Case 2nd There is now an eminent lawyer in this city who many years since was subject to attacks of a disease which by Dr Kuhn and Dr Wistar was considered as Angina Pectoris. Two or three months ago I was called in, and found him suffering with severe pain in his sternum extending along the deltoid muscle, & reacting to the fingers. Believing the complaint

to be just I treated it accordingly, and
the pain soon fastened on his wrists.

Case 3^d. - There is a Lady who I have a long
time attended with what was supposed by
Dr. Keen and Dr. Wistar to be an attack of Angina
Pectoris - For two or three weeks she has been
troubled with a severe pain extending from
her sternum to her wrists - yesterday she drank
water with red Pepper infused in it, and
two or three hours afterwards I was called
to see her with a confirmed attack of
Boulogne - It is perfectly well known that
affections of the Stomach and Lungs produce
a painful sensation about the arms and
fingers - In my Lectures on Gastritis I
mentioned that this was one of the symptoms
of that disease, and I also mentioned in
Hydrothorax that the pain in the Sternum
and on the authority of Dr. Church, contrac-
tions & pain at the wrists were not un-
common occurrences -

The treatment of Angina Pectoris is that
which is proper during the paroxysm, and
that which is to be pursued in the intervals.

As soon as the patient is attacked he should
be placed in a state of complete rest and
tranquility - Next when the symptoms

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are urgent and the pulse tolerably reg-
ular, ~~It~~ should be employed, & that it
may prove effectual the quantity extracted
should be large, 15 or 20 $\frac{1}{2}$ must be drawn
at once, and in violent cases it is necessary
to repeat the operation to the same extent in
a short time. The fact is, that sometimes
the case is of such a nature as to admit of
no delay, & if the practice be feeble & irresolute
it will prove inevitably fatal. My rule
is to urge the Lancet till relief is afforded
or as far as I can do consistently with pru-
dence. But should this general depletion
be contradicted or insufficient, cups may
be applied to the back, and blisters to
the breast with great utility.

After these the bowels should be freely
opened with some active purge, as calomel
and jalap, or an infusion of Senne leaves.
It will be perceived by you that the practice
I recommend differs materially from that
which is laid down by the whole of the
European writers, by them an entirely
opposite cure has been adopted. Con-
sidering the disease as purely spasmodic
they recur to a class of remedies which are
best calculated in their estimation at least

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to overcome this form of uncurbed action
and as Opium, Musk, Ether, Camphor, Hoffman's
Liquor, Castor and such articles the exclusively
rely. Undoubtedly either in the incipient
stage or after the more violent symptoms
have been subdued by depletion any of
these will answer exceedingly well. This
is precisely what I should do, & what I often
have done with great advantage. Called
at the very commencement of an attack
you will generally find a dose of Laudanum
or Ether to afford great relief, and after con-
spicuous depletion either of these may be em-
ployed, and the Musk perhaps will not be
found less effectual. The point for which
I contend is, that the paroxysm after it has
been completely formed can only be sub-
dued by Aps and the auxiliary means
or at least can be subdued by these remedies
more promptly than any other. But when
the pulse is weak, & the patient debilitated
we must not only refrain from evacuating
but resort to stimulants & antispasmodics.

This brings us to the consideration
of remedies proper in the intervals between
the paroxysms, in those which are given with
the view of preventing the return of the

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disease and of completely evacuating
it from the system. These are either topical or
general - Every practitioner appears struck
with the importance of establishing some
external irritation or drain in this complaint.
Formerly it was the custom to establish this
by perpetual blisters to the chest, but of
late the peculiar irritation of the Emetic
Larter seems to be preferred, and has gene-
rally been substituted. The manner of applying
it is either in the shape of a plaster or by
cloths wrung out of a saturated solution
of the salt. It induces a very peculiar pus-
tular eruption of a nature very poisonous
and difficult to heal, and very well cal-
culated to keep up a constant and permanent
irritation. Whether it is productive of
much advantage in the case before us I do
not know from my own experience, cures,
however, accomplished by this remedy alone
are recorded by the different periodical jour-
nals of England -

Not less is seen of the efficacy of
Issues applied on the inside of the thighs,
of cures effected by these alone not less
than 8 or 10 are recorded by such men as
M^r Brier and Darwin, so that there can be

but little doubt but that they really took
place - where Issues are objectionable either
from the prejudice of the patient or any
other cause you may substitute perpetual
blisters applied to the wrists. They were
much extolled by the late Dr Rush who believ-
ed them quite equal to issues -

The general remedies are the Tonics
so much relied on in the nervous and
spasmodic affections - Bark & Valerian at one
time enjoyed a high reputation, but neither
of these, nor any of the vegetable Tonics are
now much employed - A great deal more
confidence seems to be placed in the min-
eral articles especially in the properties of
Copper, white vitriol, and the preparations
of Silver - Cures are said to have been
performed by each of these, and two remark-
able cases are recorded in the medical jour-
nal by Hopp of England. - It was stated
by Dr Rush that cures have been effected
by White vitriol -

Neither of the preceding remedies have
been used by me - Entertaining a conviction
that the pathology of the disease which I
delivered to you is correct, I have always
acted accordingly in the cures that have

been presented to my attention —

My plan in the first place is to invigorate the importance of studiously avoiding all the exciting causes of the complaint — and in the next place to consider the case as exactly one of Spasm, in which all those remedies must be employed which are best adapted to an Atonic & disordered condition of the Stomach, so that the disposition to Spasm may be done away — It is essential that the diet should be light & easy of digestion, that the bowels should be continued open, & that exercise by gestation should be moderately employed — As respects medicine, such as are applicable to Dyspepsia will answer exceedingly well — But when a strong impression is demanded the remedies for the cure of Spasm, to which I have already alluded may be called in with advantage — though I have never seen a case which requires them — I allude to the mineral Tonics —

Plethora should be guarded against by Bleeds, purges and a low diet — In this way I have managed Angina Pectoris and have met with such success that I cannot help recommending my plan

to your attention - Whether the cases I 65
have met with were the genuine disease I
cannot positively say - but certain it is that
they were marked by the ordinary symptoms
and were so considered by a large number
of the most respectable practitioners of this
city. After all however you must not ex-
pect always to cure Angina Pectoris, cases
of it which have existed for a long time
are generally attended with organic disor-
-gement, and when this happens they will
prove wholly intractable by any or every
form of practice. ~

Phthisis Pulmonalis

or

Pulmonary Consumption

To conclude the consideration of the morbid affections of the Lungs, it only remains for me to deliver some account of Pulmonary Consumption.

This is an undertaking on which we enter with little encouragement or satisfaction - Confessedly no case of disease is involved in more obscurity, and there is no one in which the powers of our art are exercised with less certainty and advantage. It would appear that our want of success is partly owing to inherent difficulties of a very formidable nature, and is also perhaps in some degree attributed to ourselves. An ulcer of the Lungs which constitutes undoubtedly the worst shape of Pulmonary Consumption is necessarily tedious in its cure; from the loose & parenchymous structure of that organ.

The same happens in all parts made up chiefly of cellular texture. An ulcer seated in such parts is always *ceteris paribus* more difficult to heal. The difficulty arising from this

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cause is augmented by the movement of the Lungs in Respiration. By inspiration and expiration alternate contractions and dilatations take place, and these disturb that state of rest which is necessary to the healing process. To these two causes we may add a third viz; the constant exposure of the ulcer to the air, which under all circumstances prove very injurious in this respect. Select an ulcer in any part of the body so that it may constantly be exposed to the action of the air and you will find that the process of healing is very much retarded.

Notwithstanding these interruptions however, we know that ulcers of the Lungs of various kinds do heal without much delay or difficulty. To this end we have the testimony of many practitioners, especially those attached to armies in actual service. Hence it follows that the obstacles to the cure proceed in a great measure from the altered condition of the Pulmonary organs by disease and that the difficulty is principally owing to the nature of the morbid action as we shall presently more fully illustrate.

But as has already been pointed out, it appears to me that for our failures in effecting cures in these cases, & for our having no distinct notions regarding them, we are ourselves in some measure responsible. We include under one head a great variety of pulmonary affections, & apply without discrimination the same practice to each of these diversified complaints. My deliberate conviction is, that this sweeping sort of general action is as mischievous in this as in any other case of disease, and the first step of reform both in the theoretical and practical view of the subject before us is to contemplate it in its more minute and individual aspects. The word Phthisis signifies a destruction or wasting, & when applied to the pulmonary affections denotes an ulcerative corrosion of the Lungs. But unquestionably cases commonly considered as consumption may exist, run their course, and end fatally, without the slightest ulceration of these organs.

All writers who have treated of this complaint with hardly one solitary exception, consider ulceration as an uniform concomitant, & make it an essential ingredient

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in their definition - Cullen tells us
that pulmonary consumption is "emaciation
and activity of the body, with cough, hectic
fever, and copious expectoration of pus".
It is evident that he here enumerates the
existence of Ulcers, and this more plainly appears
in his subsequent history of the disease
By Beily in his description of the disease
it is laid down that every organic affection
of the Lungs which left to itself produces
progressive disorganization, succeeded by ulcers
and followed by death, should be considered
as *Phthisis pulmonalis* - It is not my
intention formally to criticize on either of
the definitions above stated - They appear
to me defective in many respects, & especially
because they exclude many diseases which
however they may resemble consumption
in all these symptoms are unattended
with ulceration - It is difficult to
define consumption, so diversified are
the forms which it assumes in different
cases - No practitioner has ever met with
the complaints so unequivocally characterized
that when called on to include all the va-
rieties under one definition, he would
not be greatly embarrassed to obtain precision

in the case - It will be better to
consider each species distinctly, & such a
plan I shall now pursue - By the old
writers, & particularly by those much add-
icted to artificial arrangement of disease
consumption has been divided with almost
infinite minuteness - Eighteen species of the com-
plaint are made by Sauvage, & the cat-
alogue has even been increased by some
more modern nosologists - As in my
opinion the only reason for division of
diseases is to obtain practical precision
I shall be content with proposing the
subject to you under a much more limited
number of forms. The first species of
which I shall treat is commonly designated
by the term -

Tubercular Consumption

Before proceeding to describe the sym-
ptoms of the case, I shall say a few words
on the nature and appearance of those bodies
supposed to be the cause of consumption,
as the meaning of the term informs us.

They are small bodies or masses of indurated
substances, formed in the Lungs - By Stork
who has given us the best account of these
it is said that on dissections of persons

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who have died of this disease, the
tubercles are found of all sizes from that
of a small grain or gravel to the bigness of
a chestnut or horse bean, and are generally
met with in clusters. On cutting into
them they appear of a white, smooth, carti-
laginious nature. In the smallest ones no
opening is distinguishable, but in such as
are farther advanced, minute apertures are
discoverable. The tubercles which are still
larger have one or more cavities containing
a fluid resembling pus, which being re-
moved, small openings are perceptible
and more purulent matter may be forced
out, by pressure, through the fingers - the
largest tubercles on being emptied are found
to be capsules in which interbranches the
vessel above -

As relates to their origin or mode of
production nothing precise or definite is known
it is generally supposed they are intimately
connected with a stumous or scrophulous
diathesis, and by some it is alleged that
they are new enlargements of the Lymphatic
glands. But whatever may be the correctness
of the first portion of the proposition which
is sufficiently established in a large proportion

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of cases, the second part is wholly un-
-founded - To express myself more clearly I entertain
little doubt that the tubercles are entirely con-
-nected with the scrophulous state of the system
but I do not believe that they are constituted
by enlarged lymphatic glands - No part of
the body has so few of these glands as the Lungs,
and even admitting their existence, there cannot
be one where there are two of the tubercles. -

By the dissections of Bailey it appears that they
are occasioned by mere depositions of matter
in the capillaries - that some of them are
chudy - some cartilaginous, some osseous, and
that occasionally they are compounds of matter
which cannot be compared to any thing so pec-
-uliar is its nature -

Thus formed the tubercle remains for
a great length of time often - sometimes for
many years indolent and inactive, with little
or no increase in their size - At length how-
-ever, excited by the ordinary causes of irritable-
-tion, they take on a morbid action & consti-
-tute the disease called Pulmonary Consumption,

At first these tubercles enlarge, become red,
and more vascular - then in the center one
or more cavities are formed in which are
found small quantities of imperfect pus -

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These cavities gradually increase and by 81
degrees lose their compact structure, and are
converted into an abscess denominated in med-
ical language Cavities. These bursting discharge
their contents into the Bronchia - After the
rupture of the abscess the ulcer rapidly ad-
vances till finally the whole substance of the
Lungs is destroyed or involved in one mass
of disease - It is now that Ectetic Fever
makes its appearance and the strength of
the patient sinks with prodigious rapidity
It sometimes happens that one tubercle
at a time takes on the suppurative action
and under such circumstances the progress
of the complaint is exceedingly lingering and
protracted - Now and then the ulcer heals
and a temporary remission or suspension
of the disease encourages the hope of an entire
recovery - but this state of things is elusiveness
and does not long continue - but on the next
exposure, one or more of the tubercles inflame
and a repetition of the preceding symptoms
take place - and thus the case runs on with
alternate hope and disappointment till at
length the patient becomes completely worn
out and sinks under the disease -

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Of the exciting causes of Consumption to which I allude, the common are Catarrhs and ill cured Pneumonic inflammation, repeated eruption, sedentary occupations, & particularly such as require the body to be continually bent - and those employments in which acid and irritating particles are thrown off and taken into the Lungs, as Stone cutting the grinding of needles, and working in metals from which fumes of an acid & irritating nature are disengaged - So this may be added playing on wind Instruments as the Flute & Clarinet, debauchery, excessive eating and drinking, the suppression of any accustomed evacuation, as the menses or hemorrhoids, & certain states of the air & particularly of climate, of which more hereafter -

Tubercles in the commencement are attended with a slight and short cough, which afterwards becomes habitual, and is often little remarked by the person affected, and sometimes so little as to be totally denied by the patient himself - At the same time the respiration is easily hurried by much labour or exertion, & the patient becomes languid and indolent - This state will sometimes continue for a year or even two years without any complaint being made respecting it,

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except only that there is a greater liability
to be affected by colds than usual, which are
frequent and difficult of cure. These however,
being supposed to arise from the ordinary causes
do not disturb the patient or his friends, and
therefore leads to no precaution. On one or another
of these occasions the cough becomes more con-
siderable, and is particularly troublesome on
laying down at night. This calls for the closest
attention especially if the increase of cough comes
on in the summer season. Scrophula is always
more alarming in Summer than in winter
as it denotes a firm fixture and establishment
of the disease. The cough that first comes
on, is for a considerable time without expectoration
but when from repeatedly catching colds the patient
is affected with a severe cough, there is then some
expectoration which is more considerable in the
morning. The matter thus coughed up by degrees
becomes more copious, more viscid & more opaque,
at length it assumes a yellowish or greenish colour
and a purulent appearance. The whole of the
matter however is not changed in this manner
but when one part retains the appearance of
mucus, the other is changed as above mentioned.
As the complaint progresses the cough becomes
more frequent & particularly troublesome at night,

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the matter assumes still more the pur-
-ulent aspect, and the weakness and debility are
increased from the occurrence of Hætic Fever.

This is a very short account of Pulmonary con-
-sumption as delivered by Dr Duncan, professor
at Edinburgh & physician of great merit. It is
not very difficult to distinguish tubercular
consumption from the other forms of the dis-
-ease - besides the peculiarity of the circumstan-
-ces under which it commences, there are almost
always peculiarities of form and constitution,
which predispose to the complaint and assist
in forming our judgment - such as the long &
delicate neck, the narrow chest, the prominent
shoulders, high cheek bones, delicate complexion
thick upper lip, light hair, thinness of skin
large prominent veins, weak voice, much
sensibility, great vivacity of mind, and all the
other signs denoting a scrophulous diathesis -

We have now come to the treatment
of this form of the disease - It is obvious
that this must be exceedingly different under
the various circumstances of the case - The
indications however in the first stage are clearly
marked out - the principle or leading object
is, plainly to suppress the progress of infla-
-mmation in the Tubercles so as to prevent

suppurations and its mischievous consequences - By the remedies calculated to meet this indication the most powerful and efficacious is undoubtedly Ioff - It is now near a Century since this remedy was introduced into the management of the early stages of this disease by Dr Dever, well known to you by the powder which goes by his name - It was advised by him that a portion of blood be taken for 8 or 10 days daily, and afterwards every 2 or three days for a much longer time, so that in some cases the patient was bled more than 50 times - By this abuse of the remedy it fell entirely into discredit, and as often happens in such cases, a practice directly opposite was recommended - To the late Dr Rush the credit is indisputably due of having restored the practice, so far at least as regards our country, & of regitating it with a wise discretion and sound judgment - To you into whom the principles of medicine have been so carefully distilled I need not remark that in this and other cases you should be governed in the use of the Lancet by the condition of the pulse, and by those other circumstances which assist in obtaining a knowledge of the state of the system -

As a circumstance which should influence
you in the employment of Bfs, you should always
bear in mind on the one hand the vast importance
of subduing inflammation, and on the other hand
the extreme debility which often attends the case
and the direct tendency of the remedy to hasten
and increase this state - -

after you have bled your patient as far
as you deem it proper, you may next resort as
an auxiliary means to topical bleeding - This
is to be effected by the employment of cups
and most undoubtedly the greatest advantage
results from this remedy in the early stage of
Pulmonary Consumption - It is I have reason
to believe in the generality of cases preferable
even to the use of the Lance - It relieves the
inflammation of the tubercles as effectually
and does not to the same extent exhaust the
strength of the patient - But if there is much
fever in the circulation and other unequivocal
signs of inflammation, then have recourse
to the Lance and employ it very freely -
there are indeed cases of Consumption in
which depletion in no form can be em-
ployed - the debility already existing being so
great that the detraction of the smallest portion
of blood would be palliated by the most

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serious consequences - Then we may
recur with unequivocal utility to the use
of what is called dry cupping. or in other words
the application of cups to the whole chest with-
out previously making any scarifications -

The manner in which the remedy operates
must be perfectly intelligible to you all.

It invites the circulation from the Lungs to
the surface, & thus alleviates inflammation

and retards the advancement of the tubercles
to suppuration - This mode of practice has

been much adopted in this country, and in
attestation of its efficacy we have the testimony

of the most respectable physicians - It is a
remedy with which Dr Physick is perfectly en-

-amoured from the good effects recently dis-

-covered from it by him in several cases
of Pulmonary Consumption - The immense

advantage of establishing some counter ir-

-itation in this complaint has long been known
and acknowledged - This is accomplished

either by a blister, a seton, an issue, or any
thing of a similar character - I do not

believe there is much difference in the efficacy
of these modes, & you may employ the one
or the other as you find it most convenient
and least objectionable to the patient -

But to obtain the full effect from blisters they should be kept so as to produce considerable discharge & then dress them with stimulating ointments - of late it has been much the fashion as well in Europe as in this country to substitute the application of Tartar Emetic plaster to which I have already on more than one occasion alluded. but I have reason to believe that this is recommended for very little except its novelty - It has frequently been tried by me within the last eight years, and I am not sensible that I have derived from it so much advantage as from a perpetual blister - It is useful but not more so than the old fashioned vesicating applications. It is far more disagreeable to the patient, inducing more pain and therefore is more obstinately resisted.

Emetics have been greatly established in the early stage of Pulmonary consumption - that they are beneficial cannot possibly be doubted - To this point a vast deal of evidence might be collected from all the writers who have treated on this subject They operate efficaciously in different ways first - they permanently equalize the circulation & excitability - 2nd they promote absorption

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as is proved by their effect in disposing 97
buboes and other glandular tumours. - In
addition to these they operate beneficially in a
manner which cannot be readily explained. Of
this point I am convinced from having again
and again witnessed their effects in a great
variety of cases -

Much difference of opinion has existed
as to the comparative powers of different Em-
etics - Ipecaci is commonly preferred. It is a
medicine which I have generally employed, and
I have always had reason to be satisfied with
it - But the white Vitriol is preferred by many
of the European writers, who declare that it is
better adapted to Consumption than any other
Emetic - Why it should be so has by no means
been explained in a manner satisfactory to me.

That however you ~~may~~ derive the full advan-
-tages of vomiting you should not too suddenly dis-
-sist. An Emetic should be given daily for a week
or even two or three weeks in order that it may
prove serviceable in the disease - By this frequent
repetition of the remedy you imitate the effects
of a sea voyage which has so often been beneficial
in Pthisis Pulmonalis - During my residence
in Europe this practice was chiefly relied on in
the English Hospitals in the first stage -

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Like all other remedies it was followed 99
by varying success, but on the whole it appears
to me to justify the high degree of confidence
reposed in it. Certain it is that I have often
seen tubercular consumption in the early stage
retarded by repeated vomiting - Dr. Hammond
has written the most able work on this subject.
His experience was very ample - he tried every
mode of practice, and at last was led to the
conclusion that vomiting used in a persevering
manner was infinitely most successful -

In my Lecture of yesterday I detailed to
you some of the remedies employed in the first
or inflammatory stage of consumption. As a part
of the same plan of treatment it is very common
at this state of the complaint to recur to those articles
calculated to reduce the force of the circulation.

By many practitioners the saline purges are
prescribed for this purpose, and though some-
times beneficial, they very exceedingly in their
effects - we should carefully guard against the
abuse of them which is productive of mischief
in every variety of Pulmonary affection - You
should be content with merely keeping the bowels
open -

A much more common and perhaps a
safer course to meet the indication before us

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is by the antimonial articles in minute doses
alone or in combination with nitre - What is
denominated the antimonial powder without the
calomel will be found to answer very well
and is greatly employed in the practice of
this City -

It is known to all of you that several
years past Mercury has been highly extolled
in every stage and form of Pulmonary Consump-
tion - but this more generally considered so, is
not a new practice - As long ago as commencing
the last Century it was employed by Dr Radcliff
in the case of King William - and about the
same era appeared to be the favorite remedy
in pectoral complaints - It is also a part of
the treatment recommended by Mosely in
his celebrated dissertation on Pulmonary Consumption
It appears however that except in some cases
hereafter to be detailed, the practice lost all its
reputation & for a great length of time was to-
tally abandoned - That it is occasionally beneficial
in Phthisis Pulmonalis cannot be denied - It would
be perfectly easy to collect as occurring within my
own observation a number of cases of this disease
relieved or perfectly cured by means of Salivation
- but not one of these cases was genuine or Tu-
bercular Consumption -

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The form of the disease to which Mercury is applicable shall presently be designated - it is enough at present to state that it is mischievous in every stage of Hereditary or Tubercular Consumption, and no practitioner either here or in Europe now prescribes ~~it~~ under these circumstances of the disease -

During that period when the most sanguine expectations were indulged especially in this country with regard to the powers of Mercury and that horrible complaint, the medicine was generally and indiscriminately employed in every case - the consequence was that it produced so much harm as to deter practitioners from using it, so that at present it is pretty much abandoned even by those who formerly placed so much confidence in its powers - Why mercury should be prejudicial in Tubercular Consumption considering its great efficacy in Scrophula is not intelligible.

Exactly the reverse would be expected if we were to rely on analogy alone - but of the fact of its doing harm in Tubercular Consumption, not the slightest doubt exists - It will indeed in some cases operate most copiously - In this complaint more than one instance I have known, when the disease was in the incipient stage, & the patient still able to attend to his occupation

out of doors, a dose of mercury being given
he was infinitely rendered worse, & in the course
of a few weeks destroyed - This, Gentlemen, is no
sentiment peculiar to myself: as far as I know
all the ablest practitioners in this place concur
with me, and I am also supported by the united
experience of the medical world. Among those
who had the least confidence in mercury in
consumption & especially in the hereditary kind
was Dr Rush who at one time considered it the
anchor of Hope in the complaint before us -
To my certain knowledge a few days only before
his death he refused to prescribe the medicine
having lost all confidence in its power -

What report shall I make to you of *Digitatis*:
in this disease? Not a great length of time has
elapsed since the confidence of the medical public
was almost unbounded in the article - Medical
faith indeed was so strongly placed in it, that
consumption even in the last stage, was, by the
agency of this remedy to become almost certainly
submissive to our contrivance - It is hardly
necessary for me to remark that these high
vainglorious expectations and brilliant prospects
have never been realized - Nevertheless it
does appear after making the proper deduc-
tion for the enthusiasm of the morning.

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that Digitalis manifests ample powers
in some cases of pulmonary Consumption.

To deny indeed its utility in this disease, would
be to discard altogether some of the strongest
evidence ever produced in favour of any
remedy - By Dr Darwin it was early spoken
of as an important article in the treatment
of some forms of Consumption, and not long
afterwards it attracted general attention -

It was resorted to by Ferriar & according to
his report with almost invariable success.
But no one has had so extensive a trial with
the medicine as Dr Drake, and his opinion
is favourable to it - "The article" says he "has
been given several years in pulmonary hemor-
-rhage with effect, & certainly will continue
to be with the intelligent whatever may be the
results of its trial in Phthisis - I am happy
to say however that the success which has hith-
-erto attended the exhibition of the Digitalis
in Phthisis has been very considerable. Several
patients in its confirmed state have been cured
by this remedy, & almost all have been relieved
Life has been protracted by it, & when death has
taken place, whilst the system was under its
influence, it has been free from pain & struggle.
My expectations have been completely answered".

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The paper of Dr Drake containing the history of 15 well delineated cases of Consumption treated by Digitalis, and the result was that 9 were cured & greatly relieved and 5 died.

These cases if authentic are alone sufficient to entitle the remedy to a great degree of confidence, but I doubt exceedingly whether so large a proportion of cures in Pulmonary Consumption was ever made by a single article, or by any combination of medicinal articles whatever.

Nearly about the same time that Dr Drake experimented with the Digitalis a series of trials were also instituted by Dr Fowler with hardly less effect. Next came the celebrated Dr Beddoes who in his treatise on Consumption after having informed us that his own experience fully verified the observations of the two last Gentlemen mentioned used the following forcible language - "I daily see many patients in Pulmonary Consumption advancing towards a recovery with so firm a pace that I hope consumption will hence forward be as regularly cured by the Hoxglove as ague and Fever is by the Peruvian Bark - I should expect that not one case in five would terminate as 99 in 100 have hitherto terminated. But I believe that a majority of cases will yield

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to digitalis alone - It is evident that no new cases need be suffered to advance beyond the first stage without the application of this medicine -

In the year 1800 - Dr. ——— Physician General of the Naval Hospital at Plymouth in England determined if possible to settle this question by an extensive and diversified series of experiments with the medicine - He possessed every advantage for accomplishing his purpose. The cases which came under his care were numerous, and being in a public institution he could ensure those observations in the exhibition of the article which were necessary to the fulfilment of his design - But with every allowance for the peculiar circumstances under which he was placed, his success was extraordinary and wholly unprecedented - The whole number of patients amounted to 77 of which 53 were advanced to the paralytic and 24 were in the incipient stage - of these 46 completely recovered, 33 were discharged much relieved and 10 only died - It is worthy of remark that in all the cases of recovery the pulse was reduced very considerably below the natural standard, and the amendment always appeared commensurate with the

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degree of reduction of the arterial action. 113

In the medical journals of this period many cases of *Digitatis* in Consumption were recorded and generally by respectable practitioners. From these we may collect that the article frequently effected cures, and even when it failed it almost invariably produced an alleviation of the distressing symptoms. Notwithstanding all the accumulated reports in favour of *Digitatis* in Consumption, of late it has unquestionably lost much of its reputation and seems rapidly to be falling altogether into disuse. To the extreme praise succeeded more temperate applause of the practice, comparatively little has recently been said about it. The Periodical journals no longer contain any case of its efficacy, or discussions relative to its properties, and those which so short time ago recommended its employment in the treatment of Consumption do not at present mention it as a remedy of much importance. But this is running into contrary extremes - no doubt can be entertained of the efficacy of *Digitatis* in some cases of Consumption. It is generally true however that the success has been variable and for the most part extremely precarious,

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It appears that many cases under the
 denomination of *Tuberculosis Pulmonalis* are recorded
 to have been benefitted by the remedy, yet when
 the symptoms have been so far advanced as to
 be unequivocal, the benefit was not permanent
 and on the whole we may safely affirm that
 the degree of success is much less than has been
 stated, & than we have reason to expect. Determining
 from my own experience I should
 state that the medicine is applicable only
 to the early stages. This indeed appears
 to be the view taken of the subject by all
 the late writers whom I have consulted. In
 a late work of Dr Hinglake, more celebrated
 for his treatise on the Gout 14 cases are recorded
 chiefly in the incipient stage, in one half of
 which *Digitalis* was of decided advantage, but
 in the ulcerated or suppurative stage only
 one case was accomplished by the remedy.
 By Dr McBlane a late writer on *Tuberculosis* it is stated
 that Hogglove will sometimes cure when the
 most approved remedies fail. When of itself it
 is insufficient to subdue the disease it will
 prove a valuable auxiliary to other means.
 It has always with me quieted and soothed
 the sufferings of the patient, & when it ultimately
 failed it lengthened the duration

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of life, and smoothed the avenues of Death. 117
He goes on to say "this is all I apprehend it
will be found capable of performing, but this
is doing a great deal" - These who expect won-
ders from it, or that it will in general cure
consumption will be disappointed. In a
still more recent work on the complaint by
Dr Duncan pretty near the same language
is held, (Vide the work beginning with the remark
"that only in the incipient stage could be expected
any advantage")

In the preceding views I have traced
with some minuteness the progress of opinion
relative to the powers of Digitalis in Pulmonary
consumption, so that you may be enabled com-
-pletely to appreciate its degree of efficacy, &
to determine hereafter when you shall be en-
-gaged in practice, how far that celebrated remedy
is entitled to your confidence. Notwithstanding
all that has been said on the subject, the cure
of Pulmonary consumption has not been
clearly made out, in which Digitalis is
most applicable. After all much must be
left to the sagacity, and power of discrimi-
-nation which are derived only from obser-
-vation and reflection. But I must remark
that according to the late experiments on

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Digitalis it is only suitable to the early
and incipient stage of the complaint - Even
here however in some cases it not only totally
fails in effecting a cure, but procures manifest
injury to the patient - Of all remedies it is
the most equivocal and respecting its efficacy
in any case ~~it~~ is impossible with the least
certainty to determine a priori - In the very
last consultation I had with the late Dr. Wistar
he asked me what was the result of my experience
with regards to the Foxglove - I told him that
^{was} in the former stages I had been so repeatedly
disappointed, and had so often discovered it was
productive of mischief that at one time I had
resolved never again to employ the remedy,
in consumption, but now and then in desperate
cases I had been so much delighted & surprised
at the effects it displayed that my determina-
tion had been overcome & under certain cir-
-cumstances I was now in the habit of resorting
to it - He told me that he fully concurred
with me in the estimation of the medicine.
The case in which it is most generally found
beneficial I will state to you - Now & then
they occur in delicate, irritable habit & a
slight Hemoptesis attended with cough, pain
in the side & breath, an attenuated pulse, and

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considerable debility, in which the symptoms 121
are sufficient to excite great solicitude for the
safety of the Lungs, though neither dyspnoea nor
purulent expectorations may be present - In
such cases Op is inadmissible to any extent
on account of the weakness of the patient
It is here that Digitalis given as a substitute
for the Linctus in such doses as to subdue the
pulse and keep it even is found most
generally to succeed -

These are the proper remedies to be em-
ployed in the early and what is deemed to be
the inflammatory stage of tubercular consumption
But when the disease is not arrested, abscesses
formed as has already been described, and hectic
fever with its horrible consequences ensues - The
case may now be considered as entirely beyond
the contrivance of medicine and almost inevitably
fatal - Even at this advanced stage cures have
not unfrequently been effected in the other form
of the complaint, but never in the tubercular
consumption - so far at least as my observation
extends which I suppose is not very different
from that of other practitioners - But even
under these desperate circumstances, humanity
as well as a sense of duty demands that we
should not withhold our exertions -

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We can at least afford some palliation
 of the more violent symptoms, and some allevi-
 -ation of the distress, and it is right that the
 remedies which appear best adapted for this
 purpose should be fairly tried. The leading
 indication at this conjuncture is to allude the
 hectic fever, which is so exhausting if permitted
 to continue unresisted. But of this affection &
 of the remedies suitable to it I formerly so
 fully treated that nothing at present remains
 to be said. Whether it arises from abscess in
 the Lungs or in any other part of the body it
 possesses an identity of character, and is to be
 managed by the same means. It uniformly
 wears the intermittent type and exacts the
 same remedies as those which are employed
 in the ordinary fever of this description. Viz-
 the Peruvian Bark, and the other vegetable
 Tonics, to which may be added, Arsenic, Sassa-
 parilla, Sulphur, and certain preparations of Iron
 and Steel. As this species of Consumption
 is generally thought to be of that nature
 of Scrophula, it may readily be supposed
 that the remedies beneficial in the latter
 case have not been overlooked. Consulting
 the writers on the subject you will accord-
 -ingly find that the whole of these as Opium,

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Hemlock, Guaiacum, Sassailla: &c have
been administered and with no advantage,
My success with Nitric Acid in healing Scroph-
-ulous ulcers led me to hope that benefit might
be derived from it under certain circumstances
in consumption. I have accordingly given the
medicine and found it to be of some use.
Actuated by the laudable wish to discover
some remedy for this fatal malady Dr Ro-
-a distinguished Physician of London has
lately instituted a series of experiments with
almost every article of the Materia Medica
besides the remedies previously employed he
tried the Nitrate of Silver, the white oxide of
manganese, the black oxide of Cobalt, Murate
of Barytes, the Muricated Copper, and the Phosph-
-oric Acid, but most unhappily he did not
succeed, & his publication is only a record of
his failure in his well meant endeavours
for the cause of humanity - Dr Magendi
recommends the Prussic Acid, but all the
authority of this place are against it (vide
Chapman's Therapeutics)

I have in my last Lecture on the sub-
-ject, arrived at the second stage of Pulmonary
consumption, and delivered an account of
these general remedies best calculated for

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the treatment of that complaint - of
late the practice has been revived, especially
in the City of attempting to heal ulcers of
the Lungs by the inhaling of certain odours,
and balsamic substances - What is the pre-
cise degree of benefit thus derived I am un-
able to say very positively - My own expe-
rience is not very much in its favour, though
I do not absolutely condemn the practice
More than one of my medical friends speaks
favourably of it. & I am not disposed to con-
-tract them - The articles employed for this
purpose are the Serenithurinate preparations
and the Balsam of Tolu - The former have
uniformly found so irritating to the Lungs
that I cannot help thinking them highly
injurious - They always excite cough, & they
very much aggravate the complaint - It was
remarked by me that this is an old practice
revived - that this is so there can be no
manner of doubt, though it has been claimed
as original by those who have lately reco-
-mmended it - but in Bennett's celebrated work
on Pulmonary Consumption which was written
100 years ago, I find that the practice is stron-
-gly recommended, & particularly the inhaling
of the fumes of Sulphur and the Balsam -

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could we lecture half of what he has said
on the subject we should entertain a high opin-
-ion as regards the efficacy of the remedy - By
this alone he avers that he has frequently been
able to heal ulcers of the Lungs and thus to
effect a cure of the disease - Not long after
Bennet, & Munge the inventor of the inhaler
which bears his name recommended the
vapour of Sulphuric Ether - The celebrated Lin-
-cum afterwards suggested the Hyssopum & Resi-
-nous substance, as superior to any which had
been previously tried - But of these articles
the Ether is undoubtedly the best, & may be
administered alone or impregnated with Hemlock.
Take $\frac{3j}{\text{}}'$ of the powdered leaves of the Hemlock
and $3\text{or } 4 \frac{3}{4}$ of Ether, and after digesting them
together for two or three days apply the liquor
to the mouth of the patient in such a way
as that he may inhale the vapour - This is
exceedingly useful in Pulmonary Consumption
and if it does not effect a cure it relieves the
cough, dyspnea & oppression - The Tar fumig-
-ations is much recommended, as is also burnt
wood by Dr. Physick who used it to its use by
its efficacy in ulcers of the extremities -
The fumes of Vol Alkali, may be used
on the same principle &

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On principles not altogether different, the 131
inhalation of atmospheric air veniously diluted
and combined with irrespirable gases has been
tried. To give this remedy a fair trial, the late
Dr Beddoes established at Bristol what he called
the Pneumatic Institution. It was proposed by
him to inhale carbonic acid gas, under the
impression that it would correct the fault, ulcers
and dispose them to take on the healing process.
But however plausible in speculation, when
put to the test of actual practice, the remedy
I have reason to believe proved wholly unavailing.
There is no case as far as I know on record of
a cure of Pulmonary Consumption by this man-
agement.

Exactly similar views suggested to the same
enthusiasts, that the patient should inhale the
vapour from cures. To effect this the patient
was required to continue day & night with this
animal, to live in the stall as well as sleep
there. Absurd as the practice may appear
cures in two or three cases have been effected
in this way - one was in the daughter of the
celebrated Dr Priestly, & the other in a Lady
of distinction in England. How it operates
is not at all intelligible. It is said however
that the vapour from the breath of cures has a

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salutary effect. As you may readily believe 133
I am exceedingly incredulous as to this remedy
and would by no means recommend an imi-
-tation of the practice. It is however suffi-
-ciently curious to be mentioned that those persons
whose avocations leave them to great intimacy
with animals, & particularly when they receive
the exhalations from their carcasses after slaugh-
-ter, are totally exempt from consumption.
From the extensive enquiries of Dr Beddoe
as to the modes of life & employment most
apt to favour or to oppose the prevalence
of consumption, it appears that of all the
butchers in England, hardly a single one
was affected with the disease, or had a ten-
-dency to it. It is also said that those who
work in animal jelly, particularly the man-
-ufacturers of glue, equally escape the complaint.

Among the other projects for the cure of
consumption is, placing the patient in a hole
 dug in the earth. The practice was originally
brought from Spain. Notwithstanding some
attestations in favour of the remedy its effi-
-cacy is exceedingly problematical. It was
tried by Dr Duncan, and other Physicians in
Edinburgh when I resided in that City, but so
far was it from doing good, that it aggravated

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the complaint by inducing catarrh. Of the practice has been used in Ireland instead of Scotland, it would have been considered as a blunder or a Bull. To place a patient in a grave seems more applicable to one who is already dead, than fitted to effect a cure in those who are alive.

As the disease advances, especially in the final stages, certain affections arise of a nature so urgent, as to demand particular attention, as these are symptomatic all that we can do is to palliate the more violent & distressing symptoms, & to effect a temporary relief. - of the affections alluded to, one of the most troublesome are the night sweats. As this arises from velocity of the exhalents, it is most effectually checked by applications made to the part affected. By sleeping in flannel alone I have known the effect to be procured and especially if the surface were previously rubbed with some stimulating article as Rob Brandy or Salt. Of the Internal remedies the most effectual are the mineral acids especially the Sulphuric. This may be used alone or in combination with the vegetable bitters. Sugar of Lead, Arsenic, and Alum have also been recommended.

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Now & then advantage may be derived from
prepared chalk, or oyster shells, or what will an-
-swer still better, Lime water frequently taken.

Extraordinary as it may appear I have known
some mild diuretics, as the juice of water
melon, Parsley Tea, or even cold water to affect
relief in the night sweats - Their mode of
operating is very obvious, & consists in the
derivation of action from the surface to the
urinary organs - Sometimes it happens that
the sweats are checked by strongly exciting the
exhalant vessels with the active diaphoretics
The practice is of constant utility & is rarely
employed - But cases may occur in which
the remedy may do good - we often check diarr-
-hoea by purging, & on the same principle
diaphoretics may prove efficacious in the
case before us -

As regards Drains another of these affections
I have already treated fully on the subject, and
shall not therefore detain you further - The
remedies are precisely the same with those which
are given in the primary forms of the complaint
It is proper to state that purging at this per-
-iod of Pulmonary Consumption is particularly
mischievous from the extreme debility which
it induces, & hence should be checked as soon

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as possible - To mention this is more important because Diarrhoea is apt to relieve the cough, & check so much the other symptoms that if not apprized of the consequence the patient as well as the practitioner may be induced to suffer it to run on to a very dangerous extent, -

At this stage, the cough which throughout is troublesome, becomes exceedingly aggravated, & calls for relief. Much of the mixtures mentioned under the head of Pneumonia & others are here useful - The preparation of Nitric Acid, & the milk of Gum Ammonia is exceedingly so, if there is much dyspnoea - It is here also that the balsamic articles sometimes evince their weakest powers - The Balsam of Tolu is to be preferred, though the Copaiva & other resinous articles are not without utility, and may sometimes be administered when the former is not applicable to the case - There is an article vended in this City, & other parts of the United States called the Balsam of Honey which is admirably adapted to the last stage of the Consumption - It is essentially composed of the Balsam of Tolu, so blended however with other articles that the mixture is much more agreeable to the palate

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than the simple undisguised medicine.

It is not long since great confidence was
reposed in the Balsams as remedies in the
complaint before us - But they were condemn-
-ed by the celebrated John Feathergill from
their heating & stimulating qualities - Ever
since his publication appeared they have been
less employed, and are now rarely resorted to
either in this country or in Europe - But I
am convinced of their great utility, & that they
are productive of injury only when injudi-
-ciously applied - Employed as they formerly
were in every stage & variety of cough they
do harm, & cause the patient to experience great
pain - But the fault lies with the practitioner
and not with the medicine -

After all we must chiefly rely on Opium as
a remedy for the cough; accordingly that medi-
-cine enters largely into all the cough mix-
-tures, of which it forms the most active ingre-
-dient, & in which it can rarely be dispensed with,
when it produces no permanent impression it relieves
the more distressing symptoms, & alleviates the disease.
but I have reason to believe that it accomplishes
more than mere palliation - In those cases espe-
-cially which arise from other causes than
tubercles I never derived more benefit from

• We must also resort to inhalations of
Talc, Finest Hemlock, Nolo Alkali, the smoking
Thammonium & Salicis

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any plan of treatment than from the liberal
use of Opium. It is perfectly well known
that ulcers of various kinds are healed under
the use of this article, & it must be particularly
applicable to those of the Lungs in which it is
necessary to keep these organs as much at rest as
possible. This concludes what I have to say
on the subject of Tubercular Consumption
I should not have entered so fully into it, were
it not for the circumstance that the treatment
adapted to this, is also with some variations
suitable to the other forms.

Catarrhal Consumption

I am next to call your attention to catarrhal
consumption. This differs from the former
species in several particulars. It occurs
without any constitutional predisposition
or stimulus crathesis, & instead of the substance
of the Lungs, is seated in the membranous
lining of the Trachea, & its ramifications, the
Bronchia. It commences always as a simple
catarrh and indeed may be considered as
that complaint protracted & confirmed by
ill management. It may generally be distin-
guished from Tubercular consumption
though the two are sometimes analogous

in all the leading symptoms - At first 145
the disease puts on all the appearance of com-
mon catarrh, and is attended with cough, pain
in the side and breast with some soreness of
the throat, usually ascribed to the efforts used
in coughing - There is much expectoration of
phlegm & mucus which gradually changes its
character & becomes purulent, and at last
pure pus is evacuated. It is now that ulcers
2 are believed to exist by a majority of practi-
tioners - but this is not the case - Dissections
of persons who have died of catarrhal consump-
tion show, that the purulent expectoration
is merely a secretion of the membranous lin-
ing of the Trachea & Bronchia, & so far is ul-
ceration from being present that it is said
that the Lungs hardly ever exhibit any phe-
nomena of disease in their structure, but
from the high degree of inflammation which
takes place, the mucus lining of the Trachea
and its branches are so affected as to produce
a purulent expectoration - Another peculiar-
ity of this form is, that it is never attended
with hemoptesis in any stage, & the matter
expectorated is generally unmixed with
with blood, or if at all tinged it is only with
small streaks occasioned by the rupture of

to vessels in the inflamed surface. 147

As relates to the treatment I have not much to say - Most of the remedies already mentioned appear to be indicated also in this species of the complaint - Being however more inflammatory in its nature, and occurring in a state of the system more robust than the scrophulous consumption, it calls for a more copious employment of all the depleting measures, & these may be carried to a great extent with perfect safety and unequivocal utility. Of the whole of them I so fully treated in a former Lecture that they need not again be mentioned by me. But it is right for you to know that in one or two particulars the practice is somewhat different. I am confident that in Catarrhus Laryngis, emetics so much employed by some in consumption generally are far the most effectual. & I would recommend them always to be steadily used after the inflammation has been subdued by the more directly depleting remedies. But the best course of treatment is to place the patient under the impression of mercury, & to continue this impression moderately for several weeks. This is the case in which Salivation should be invariably prescribed, as even where it is not effectual it never causes any detrimental or troublesome consequences.

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Apostematous Consumption

To the two preceding species a third may be added which is exceedingly common in cold climates, and hence is very prevalent in certain portions of our country. In all cases it may be considered as the consequence of Pneumonic inflammation, & has received its name from the abscess in the Lungs which always exists. It is called Apostematous Consumption. There is so little difficulty in distinguishing it, that it is unnecessary to dwell on its history. Being occasioned by Pleuritis, pneumonia, contusions, and other causes of actual inflammation of the Lungs, It may always be suspected when there has been previously any such disease or accident.

But the symptoms are also different, a case of Apostematous Consumption is attended with a deep seated pain which is fixed in some one part of the chest, while the pain in the other species is changeable & fluctuating. There is constant Dyspnea and oppression, & the cough is extremely violent, much mucus & phlegm is expectorated till the abscess ruptures.

The treatment, at least in the early stages is precisely similar to that which is employed in the catarrhal species. The object is to

Abstract of the Proceedings of the
General Assembly of the
Province of New York

The General Assembly of the Province of New York, convened at Albany, on the 14th day of January, 1784, for the purpose of considering the petition of the Board of Trade, and of the merchants of the said Province, for a repeal of the Act, passed in the year 1773, intitled, "An Act to regulate the Trade and Commerce of the said Province, in relation to the Importation and Exportation of Goods, Wares, and Merchandises, and to the Navigation of the said Province, and to the Regulation of the said Trade and Commerce, in relation to the said Goods, Wares, and Merchandises, and to the said Navigation." The said Board of Trade, and the said merchants, petitioned the said Assembly, that the said Act might be repealed, on the ground, that the said Act was oppressive and burdensome to the said Trade and Commerce, and to the said Navigation, and that the repeal of the said Act would be for the benefit of the said Trade and Commerce, and of the said Navigation. The said Assembly, after a full and free discussion of the said petition, and of the merits of the said Act, resolved, that the said Act should be repealed, and that the said Trade and Commerce, and the said Navigation, should be regulated, in conformity with the principles of justice, and of equity, and of the public good. The said Assembly, further resolved, that the said Board of Trade, and the said merchants, should be reimbursed the costs and charges, incurred by them, in the prosecution of the said petition. The said Assembly, then adjourned, until the next day of the month of January, 1784.

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prevents the formation of an abscess, and this
must be done by subduing inflammation, by an
energetic employment of all the measures best
calculated for this purpose. It is here that from
the very commencement of the attack we are
to employ Mercury for Salivation, totally
regardless of the state of the pulse, & the other
symptoms of inflammatory action. Of all the
remedies Mercury is the most effectual in
suppressing inflammation in the great viscera,
as we habitually see in the Liver, Spleen, Kidneys
and certainly not less so as regards the Lungs.
Its efficacy indeed in the last case is so great
that I resort to it as a means of success in all
obstinate Pleurisys, & I am not certain that the
remedy under any circumstances more advantage-
ously displays its power. — Do not therefore
neglect a Salivation in this species of the dis-
-ease, as even the diligent use of mercury is of
great importance in the treatment. The abscess
however being formed it is important to dis-
-charge its contents, & afterwards to treat the ulcer.
It commonly ruptures spontaneously, but when
this does not happen, & there is an urgent nec-
-essity for the rupture, we may accomplish
the desired end by the administration of an
Emetic. — But in some cases even after the abscess

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has burst not infrequently the Lungs are in-
flamed & the Dyspnea & other distressing symptoms
continue as before. It is here desirable to procure
expectoration, & this is best effected by the inha-
-lation of warm water or vinegar, or which is
infinitely to be preferred the vapour of Ether
as formerly mentioned -

Every part of the subsequent treatment
in this case is so analogous to what has been
already mentioned in Tubercular Consumption
that any further notice of it becomes superflu-
-ous. But I cannot refrain from remarking
that in some cases of Apostemata Consumption
I have derived so great advantage from a mixture
of nitric acid & ammonia that I wish to press
it particularly on your attention. Whether it is
by the virtues of the Nitric acid or of the other
ingredients I cannot determine, but that the
preparation is beneficial by mitigating the
cough, Dyspnea & other symptoms there is no
doubt - nor is it at all excusable from the
known properties of Nitric acid that it is
nowever extremely useful by promoting the
healing of ulcers - I have before shown that
it produces such an effect in some very ob-
-stinate cases, and I see no reason why it should
not operate in the same way with regards to

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ules of the Pulmonary organs - After all
however through occasionally the two last forms
of consumption are cured even in the last stage
yet it is our duty to attack the complaint
as soon as possible, & never adopt such measures
as will tend to hinder its occurrence -

The first step in this prophylactic course is
generally to recommend the removal of the
patient to a more favourable climate - By
the general consent of practitioners, a climate
dry, temperate, & equal was selected for the
purpose - but of late years this long & univ-
-ersally received opinion has been questioned
and the practice of course controuerted - In
one of my Lectures on Pathology I remarked
that the practice of Dr Bonas a distinguished
physician of this City was to send his pati-
-ents into miasmatic countries, with a view
of counteracting the disease, or the tendency
of it by inducing ague & fever - What was the
result of this extraordinary experiment I cannot
exactly say, though it appears from traditional
authority that it was not without benefit,
The precept taught by some medical men
of England is, that the action of Intermit-
-tents is an uncomfortable one, & when it is com-
-pletely established all other actions, and

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especially the action of Consumption are suppressed or removed - It is called in the Language of one of these writers a Despot who bears no brother near the Throne.

To support their doctrine in the first place they attempt to show that through the world where Fever & ague to any extent prevails, every other complaint vanishes, and this they assert is especially true as regards England. Thus in the county of Devonshire by far the mildest and most temperate in Great Britain, Consumption prevails to a great extent, while there is not a solitary case of Ague & Fever - On the other hand in the county of Lincolnshire where there are frequent sources of Marsh miasmata, and where Fever & ague exists even to a desolating degree, Pulmonary Consumption is entirely unknown nor do they limit the source of evidence to their own country - On the contrary extending their researches over Europe they find every where, or at least pretend to find confirmation of their sentiment. Thus in Holland the Ague & Fever is prevalent to a great degree, but it is stated positively that Pulmonary Consumption is among the rarest of complaints. I recollect that by Dr Logan who practiced in Holland the same remark was made in a work which he published 20 or 30 years ago - The same is said to hold in Flanders & other parts of Europe.

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The fact that Ague & Fever prevails through Egypt, while consumption is entirely unknown goes to confirm the same opinion - But the strongest evidence is afforded by Italy - It is known to you that this climate is by far the most equable and temperate in the world - It is said by writers to whom I refer that in those parts which are gifted with perpetual serenity & perennial brightness consumption prevails to an alarming extent, but in the sunny districts of the country, and especially in the parts where rice has lately been cultivated, and which of course are occasionally overflowed, ague & Fever prevail and consumption is wholly unknown.

Notwithstanding all this accumulation of evidence I do not wish to press the opinion upon you - Before we are led to adopt it we ought to demand much stronger evidence, and many more sources of information than we have hitherto received - Before surrendering up an habitual prejudice in favour of any practical doctrine, a doctrine too sanctioned by the lessons of immemorial experience, we have a right to require that facts of an indisputable nature should be advanced against it - The facts of this nature are advanced we should hold fast that ground which practical experience tells us is perfectly sound -

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At the close of the Lecture of yesterday I was 161
speaking relative to the description of climate, most
favourable to consumptive patients. It appears
from what was said on that occasion, that though
there is little doubt that a mild & equal climate
is preferable in this case, yet it is exceedingly
difficult to determine the exact spot to which
it would be best to send our patients. It seems
from indisputable testimony that many places
to which we have been in the habit of sending
our patients, are liable to the disease, & perhaps
little can be gained by a change of residence. No
part of France is entirely exempt from this com-
plaint which abundantly prevails in Paris, Lyons,
and Montpellier. The two last of which are much
resorted to by the infirm & multitudes remain -
Nor is the case different as regards Naples, Rome
Venice, Leghorn, or indeed any one position in
Italy - and even Lisbon or the Island of Madeira
so greatly celebrated as resorts for consumptive patients.
After a great deal of inquiry, the South of Spain
and particularly in & about Valencia has been
selected for this purpose -

As regards our own country, some one of
the West India Islands, & Bermuda is preferred
from its exposure to the Sea, occasioned by
its diminutive size -

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[Marginal notes in a cursive script, likely from the reverse side of the page.]

Any one of the large West India Islands will answer very well, & is the best place to which the patient can be sent. I believe it is pretty accurately ascertained, that there is no section of the ~~United~~ States in which the disease is not met with, though it abounds most along the sea coast, & especially New-York, and the Eastern States. It is right therefore to recommend the removal of your patients from these situations to some spot less exposed to the complaint. But so exceedingly variable is every part of our climate that it is hardly safe to trust a person attacked with consumption any where within our limits - To the interior of Georgia, South Carolina, & New Orleans there is least objection - But even there the weather is not without vicissitudes, & there is great hazard unless care & circumspection are used.

Considering on the whole the numerous inconveniences & difficulties attending on a change of residence to a distant place, & the equivocal advantage of it in many instances, I do not know whether the confinement of the patient at home in a room of a properly regulated temperature, of from 65 to 68° is not to be preferred - It is true that much is ascribed to the effects of a sea voyage and perhaps justly, when resorted too in the early stage.

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of the disease - But if the cure is advanced this
remedy is destitute of efficacy, & I have more than
once known death to be caused by the hardships &
exposure of a Sea Voyage -

As a part of the preceding plan, exercise reg-
-ularly & moderately taken, especially on Horse Back
is much celebrated, & its importance is fully re-
-cognized - It was recommended originally by Syden-
-ham who spoke favourably of it in terms more
confident than he was accustomed to employ,
& so far as I know all subsequent experience
concur to support his opinion of the remedy.
But this like every other part of the treatment
must be regulated by Discrimination & Judgment
Being highly stimulant & tonic it should never
be resorted to while the pulse is full, and
much inflammatory action prevails -
Employed in this condition of the system
it often occasions hæmoptoe and accelerates
the march of the disease, but when the patient
has been properly prepared for it, then regular
exercise on horse back is one of the most im-
-portant remedies & deserves all the praise
which has so long & so generally been conferred
on it -

After all however little advantage
will be gained by any course of treatment

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unless the diet be strictly regulated - By
common consent of practitioners, that food should
be prescribed which is light & of easy digestion,
without the slightest tendency to heat or stim-
ulate the system. No course of living is better
suited to this complaint than milk alone or
united with the farinaceous articles, & hence
a milk diet has been immemorially recom-
mended -

To conclude the prophylactic plan
I have only to add that all the exciting
causes should be studiously avoided, and
above all an exposure to colds, which must
be guarded against by wearing flannels at all
seasons next the skin -

With this I close the history & treatment
of Pulmonary Consumption - It will be re-
collected that of the three leading forms I
have pronounced one & I apprehend on the
authority of the Medical world - I have pronounce
it wholly incurable!!! - Of the two other
cases of the disease, though now & then we do
accomplish cures, yet these are exceedingly rare
and we enter in the treatment with little
confidence of ultimate success - It is there-
fore one of the highest and most sacred of
our duties to prevent the formation of the

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of the disease, and with this view uniformly 169.
attacks it in its early stages. The experience of
every physician warrants the conclusion of the
incurable nature of Tubercular consumption
and that although cures of the other forms
of the complaint are occasionally effected
yet even here we cannot place entire con-
fidence in our remedies.



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